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# THE HEALTH OF LEICESTER DURING 1942

**E. K. MACDONALD**  
O.B.E., M.D., D.P.H.



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THE NINETY-FOURTH  
**ANNUAL REPORT**  
UPON THE  
**HEALTH OF LEICESTER**  
FOR THE YEAR 1942

BY

E. K. MACDONALD, O.B.E., M.D., B.S., D.P.H.  
MEDICAL OFFICER OF HEALTH.

**APPENDICES**

- I. REPORT of the TUBERCULOSIS OFFICER.
- II. REPORT on the ISOLATION HOSPITAL AND SANATORIUM.
- III. REPORT on the CITY GENERAL HOSPITAL.
- IV. REPORT of the MATERNITY and CHILD WELFARE MEDICAL OFFICER.
- V. REPORT of the CITY ANALYST.
- VI. REPORT of the CHIEF SANITARY INSPECTOR.
- VII. REPORT of the VENEREAL DISEASES MEDICAL OFFICER.

LEICESTER :

THE BLACKFRIARS PRESS LTD., SMITH-DORRIEN ROAD.



# CITY OF LEICESTER

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## HEALTH COMMITTEE

---

### Chairman.

ALD. G. PARBURY.

### Vice-Chairman.

DR. ASTLEY CLARKE, D.L., J.P.

THE LORD MAYOR.

MR. ADAMS, J.P.

„ BOWDEN.

„ CAVE.

„ COOPER.

„ CORT.

MISS FORTEY, J.P., B.Sc.

ALD. HAND, J.P.

MR. HARRIS.

„ HARRISON, M.B.E., J.P.

„ HOLYOAK.

„ JACKSON.

„ ROUND, J.P.

MRS. SIMPSON, J.P.

MR. F. S. SMITH.

MRS. SWAINSTON.

ALD. IDA WARNER, M.B.E., J.P.

„ WILFORD, J.P.

The Committee meet on the 4th Friday in each month in the Committee Room, Town Hall, at 3.30 p.m.

The Health Committee, together with the following co-opted members, not being members of the City Council, constitute the Statutory Maternity and Child Welfare Committee :—Mrs. Banton, Mrs. Taylor, Miss E. J. Windley, B.A.

### Accounts Sub-Committee.

MR. ROUND.  
„ HOLYOAK.

MRS. SWAINSTON.

### Health Inspection Sub-Committee.

MR. CORT (Chairman).  
„ ADAMS.  
„ CAVE.  
DR. ASTLEY CLARKE.  
MR. COOPER.

MISS FORTEY.  
„ FRISBY.  
MR. HARRIS.  
ALD. PARBURY.  
ALD. IDA WARNER.

### Isolation Hospital and Dispensary and Venereal Diseases Sub-Committee.

MR. HARRISON (Chairman).  
„ CAVE.  
DR. ASTLEY CLARKE.  
MR. COOPER.  
„ CORT.  
MISS FORTEY.

MR. HARRIS.  
„ JACKSON.  
ALD. PARBURY.  
MR. ROUND.  
MRS. SWAINSTON.  
ALD. WILFORD.

### ISOLATION HOSPITAL SUB-COMMITTEES.

#### Grounds.

MR. COOPER (Chairman).  
„ CORT  
DR. ASTLEY CLARKE.

MR. HARRISON.  
ALD. PARBURY.  
MR. ROUND.

#### Purchasing.

DR. ASTLEY CLARKE.  
MISS FORTEY.

MR. HARRISON  
„ ROUND.

#### Assessments.

MR. CAVE.  
DR. ASTLEY CLARKE.  
MR. COOPER

MR. CORT.  
„ HARRISON.  
ALD. PARBURY.

### “HOME PLACE” MANAGEMENT SUB-COMMITTEE.

ALD. WILFORD (Chairman).  
DR. ASTLEY CLARKE.  
MR. CORT.

ALD. PARBURY.  
MRS. SWAINSTON.



### **Maternity and Child Welfare Sub-Committee.**

Miss FORTEY (Chairman).	ALD. PARBURY.
MR. BOWDEN	MR. F. S. SMITH.
„ CAVE.	MRS. SIMPSON.
DR. ASTLEY CLARKE.	„ BANTON.
MR. COOPER.	„ TAYLOR.
Miss FRISBY.	Miss WINDLEY.

### **Necessitous Maternity Cases.**

MRS. SIMPSON.	Miss WINDLEY.
---------------	---------------

### **Maternity Home and Day Nursery Management Sub-Committee.**

ALD. HAND (Chairman).	ALD. PARBURY.
MR. BOWDEN.	MRS. SIMPSON.
DR. ASTLEY CLARKE.	„ BANTON.
Miss FORTEY.	„ TAYLOR.
„ FRISBY.	Miss WINDLEY.

### **General Purposes Sub-Committee.**

ALD. PARBURY (Chairman).	ALD. HAND.
DR. ASTLEY CLARKE.	MR. HARRISON.
MR. CORT.	MRS. SWAINSTON.
Miss FORTEY.	ALD. WILFORD.

### **City General Hospital Sub-Committee.**

DR. ASTLEY CLARKE (Chairman).	MR. HARRISON.
MR. COOPER.	ALD. PARBURY.
CORT.	MR. ROUND.
„ Miss FORTEY.	MRS. SIMPSON.
„ FRISBY.	„ SWAINSTON.
MR. HARRIS.	ALD. IDA WARNER.

### **CITY GENERAL HOSPITAL SUB-COMMITTEES.**

#### **Assessments.**

MR. CAVE.	MR. CORT.
DR. ASTLEY CLARKE.	ALD. PARBURY.
MR. COOPER.	

#### **Contracts and Purchasing.**

DR. ASTLEY CLARKE.	MR. HARRISON.
MR. CORT.	ALD. PARBURY.
Miss FORTEY.	ALD. IDA WARNER.
„ FRISBY.	

#### **Farms, Grounds and Buildings.**

MR. CORT (Chairman).	MR. HARRISON.
DR. ASTLEY CLARKE.	ALD. PARBURY.
MR. COOPER.	MR. ROUND.

### **Slum Clearance and Property Inspection Sub-Committee**

ALD. PARBURY (Chairman).	Miss FORTEY.
MR. ADAMS.	MR. HARRISON.
DR. ASTLEY CLARKE.	„ JACKSON.
MR. COOPER.	„ ROUND.
„ CORT.	ALD. IDA WARNER.

### **Office Accommodation Sub-Committee**

ALD. PARBURY (Chairman)	Miss FRISBY.
MR. CAVE.	ALD. HAND.
DR. ASTLEY CLARKE.	MR. HARRIS.
MR. COOPER.	„ HARRISON.
„ CORT.	ALD. WILFORD.
Miss FORTEY.	

# Staff of the Health Department

(As constituted January, 1943.)

## Medical Officer of Health.

E. K. MACDONALD, M.D., B.S., M.R.C.S., L.R.C.P., D.P.H.

## Deputy Medical Officer of Health and Tuberculosis Officer.

WYVILLE S. THOMSON, M.D., D.P.H.

## Secretary.

WILFRID CARR, F.C.C.S.

## Medical Officers in Charge of Departments.

*Medical Superintendent, City General Hospital* .. A. P. M. PAGE, M.D., M.R.C.P.  
*Medical Superintendent, City Isolation Hospital* .. J. C. H. MACKENZIE, M.D., D.P.H.  
*Medical Officer for Maternity and Child Welfare* .. E. B. B. HUMPHREYS, M.B., Ch.B.  
*Pathologist* .. .. . R. S. WALE, M.D.

## Assistant Medical Officer.

*Assistant Tuberculosis Officer* .. .. . E. G. LAWRIE, M.B., Ch.B.

## Assistant Medical Officers (and Assistant School Medical Officers.)

K. McALPINE, M.B., Ch.B. M. B. WILSON, M.B., Ch.B., D.P.H.  
 GLADYS RANDALL, M.B., B.S., D.P.H. A. M. CUSACK, M.B., B.S., D.P.H.  
 MARGARET D. HIRD, M.B., Ch.B., D.P.H. L. LICHTENSTEIN, M.D.  
 JANET M. DONE, M.D., D.P.H. I. DUB, M.D.  
 PAULINE K. HEARTH, M.B., B.Ch.,  
 B.A.O., D.P.H.

## City General Hospital.

*Deputy Medical Superintendent, J. M. J. d'OFFAY, M.B., Ch.B., F.R.C.S.*

*Five Resident Medical Officers.*

## City Isolation Hospital and Sanatorium.

*Deputy Medical Superintendent : C. W. C. KARRAN, M.B., D.C.O.G., D.P.H.*

*Three Resident Medical Officers.*

## Consultant Medical Officers (all Departments).

<i>Physicians</i> .. .. .	{ J. V. C. BRAITHWAITE, M.D., F.R.C.P. R. M. CAIRNS, M.D., Ch.B.
<i>Cardiologist</i> .. .. .	{ P. P. W. JAMIE, M.A., M.D., B.Ch.
<i>Gynaecologist</i> .. .. .	{ T. C. CLARE, M.D., F.R.C.S., M.C.O.G.
<i>Surgeons</i> .. .. .	{ E. R. FRIZELLE, M.D., F.R.C.S. R. S. LAWSON, M.B., Ch.B., F.R.C.S. D. B. MCGAVIN, M.B., B.Ch., F.R.C.S., M.R.C.S., L.R.C.B. J. C. BARRATT, M.B., B.S., F.R.C.S., M.R.C.S., L.R.C.P.
<i>Gynaecological Surgeon and Obstetrician</i> ..	R. LODGE, M.B., M.R.C.O.G.
<i>Orthopaedic Surgeon</i> .. .. .	L. MORRIS, M.D., F.R.C.S.
<i>Ear, Nose and Throat Surgeon</i> .. .. .	N. E. KENDALL, F.R.C.S.
<i>Ophthalmic Surgeon</i> .. .. .	A. L. MCCURRY, M.D., B.Ch.
<i>Obstetric Surgeon (to Westcotes)</i> .. .. .	T. W. ALLEN, B.A., M.B., D.C.O.G.
<i>Radiologist</i> .. .. .	D. F. LAWSON, M.A., M.B., B.Ch., D.M.R.E.
<i>Dermatologist</i> .. .. .	F. A. E. SILCOCK, M.D., D.P.H.
<i>Dental Surgeon</i> .. .. .	J. ROWLETT, L.D.S.
<i>Anaesthetists</i> .. .. .	{ D. JUSTIN DAVIES, M.B., D.A. (MRS.) P. MASON, M.R.C.S., L.R.C.P., D.A. C. H. WILKIE, M.B., Ch.B., B.Sc., <i>Director of V.D. Services.</i>
<i>Venereologists</i> .. .. .	{ H. N. C. ATKINSON, M.R.C.S., L.R.C.P. (MRS.) K. M. LODGE, M.B., B.S., M.R.C.S., L.R.C.P. (MRS.) M. NEWTON-DAVIS, M.B., B.S.
<i>Public Vaccinators</i> .. .. .	{ A. J. L. SPEECHLEY, M.R.C.S., L.R.C.P. C. H. PARKER, M.R.C.S., L.R.C.P.
<i>District Medical Officers</i> .. .. .	{ No. 1. A. MORRICK, M.B., Ch.B. 2. A. J. L. SPEECHLEY, M.R.C.S. L.R.C.P. 2a. F. X. McELROY, L.R.C.P. & S. 3. J. H. NOBLE, M.D., M.R.C.P. 4. F. G. MACNAUGHTON, M.D. 5. P. J. J. HUGHES, M.B., B.Ch. 6. I. PLATT, M.B., Ch.B. 7. G. SMITH, M.D., Ch.B.



### Matrons.

<i>City General Hospital</i>	..	..	Miss E. L. LIVERMORE (Acting) S.R.N., S.C.M.
<i>City Isolation Hospital</i>	..	..	" B. NESBITT, S.R.N.
<i>Westcotes Maternity Home</i>	..	..	" E. BRADSHAW, S.R.N., S.C.M.
<i>Day Nursery</i>	..	..	" I. R. CUTLER, S.R.N., S.C.M.
<i>"Home Place," Holt</i>	..	..	" R. E. FRY.

### Engineer to Health Department.

R. H. LETCHFORD.

### Public Analyst's Laboratory.

<i>Public Analyst</i>	..	..	..	..	..	F. C. BULLOCK, B.Sc., F.I.C.
<i>Assistants</i>	..	..	..	..	..	{ J. SMART. *P. G. WRIGHT. H. M. BEE.

### Sanitary Inspectors.

<i>Chief Inspector</i>	..	..	..	..	..	F. G. McHUGH, 1 3 4 5
<i>Deputy Chief Inspector</i>	..	..	..	..	..	A. T. PRICE, 1 3

#### Inspectors—

R. T. BLAYLOCK, 1 3 4 7	F. W. MURRAY, 7 8
*T. W. BERESFORD, 2 3	W. MUSTON, 1 3
H. BURLEY, 2 3	J. W. NORTH, 1 3
H. CLOUGH, 1 3	*E. OWEN, 2 3 14
M. C. CRIPPS, 1 3	W. J. PARKINSON, 1 3 6
H. ELKINGTON, 3 5	*G. V. PENN, 2 3
R. V. FIDDES, 1 3	*A. SMITH, 2 3 4 14
G. H. FYFE, 2 3	E. THOMPSON, 1 3
W. J. GETGOOD, 1 3 4	*A. G. WATKIN, 2 3 16
T. HINES, 1 3	A. WELTON, 1 3
W. C. LONG, 1 3	J. WRIGHT, 2 3
G. H. MAWHINNEY, 2 3 4 15	J. YATES, 1 3
*A. McCARTNEY, 2 14	

### Health Visitors.

<i>Superintendent..</i>	..	..	..	..	..	MRS. REED, 9 10
<i>Deputy Superintendent</i>	..	..	..	..	..	Miss E. M. CRAGG, 9 10 11

#### District Health Visitors—

Miss M. ASH, 9 12 13	Miss E. MYCOCK, 9 10 13
" C. M. CASSON, 9 10 13	" P. NEWTON, 9 10 13
" L. CHAMBERS, 9 13	" K. F. PORTER, 9 12 13
" M. CONLON, 9 12 13	" H. E. RICH, 9 12 13
" H. M. DENSHAM, 9 12 13	" E. THOMPSON, 9 10 13
" M. E. HURST, 9 10 13	" F. E. TOON, 9 13
" S. H. HUGHES, 9 10 13	" B. E. TURNER, 9 10 13
" A. KAVANAGH, 9 12 13	" E. WILFORD, 9 13
" M. D. LLOYD, 9 10 13	" E. L. WOLLASTON, 9 13
" J. G. MASTERS, 9 10	

<i>Tuberculosis Nurses</i>	..	..	..	..	{ Miss F. BEASLEY, 9 13 " E. MOUND, 9 13 " C. NEILL, 11
----------------------------	----	----	----	----	---

1. Holds Sanitary Inspector's Certif. Roy. San. Inst.
2. Holds Royal Sanitary Institute and Sanitary Inspectors Exam. Joint Board Certificate.
3. Holds Meat and Food Inspector's Certif. Roy. San. Inst.
4. Holds Certif. of Roy. San. Inst. for San. Science as applied to Buildings and Public Works.
5. Holds Sanitary Inspector's Certif. under Public Health (London) Act, 1891.
6. Holds Sanitary Inspector's Certif. San. Inspectors' Asscn.
7. Holds Certif. of Royal San. Asscn. of Scotland for Meat Inspection.
8. Holds Certif. of Royal San. Asscn. of Scotland for Sanitary Science.
9. Holds Certif. of the Central Midwives' Board.
10. Holds Health Visitor's Certif. of the Roy. San. Inst.
11. Holds Certif. as fully Trained Nurse.
12. Holds Health Visitor's Certificate.
13. Holds State Registered Nursing Certificate.
14. Holds Liverpool University Certificate of Competency as Meat and Food Inspector.
15. Holds Diploma of Royal Institute of Public Health and Hygiene.
16. Holds Smoke Inspector's Certificate, R.S.I.

\* On Active Service.



## Municipal Midwives.

### *Area No 1. Saffron Lane.*

MRS. COPSON, S.C.M., 511, Saffron Lane	..	..	..	..	..	Tel No. 32374
MRS. DODSON, S.C.M., 2, Burnaston Road	..	..	..	..	..	32172
MISS GREEN, S.C.M., 2, Burnaston Road	..	..	..	..	..	32172

### *Area No. 2. Braunstone.*

MISS HOPKINS, S.C.M., 17, Imperial Avenue	..	..	..	..	..	34398
MRS. F. M. BRAILSFORD, 327, Gooding Avenue	..	..	..	..	..	88761
MRS. RITCHIE, S.C.M., 291, Gooding Avenue	..	..	..	..	..	88598
MISS McCAULL, S.C.M., 13, Braunstone Avenue	..	..	..	..	..	22323

### *Area No. 3. Western.*

MISS CONWAY S.R.N., S.C.M., 145, Glenfield Road	..	..	..	..	..	88350
MISS P. SPINK, S.R.N., S.C.M., 100, Anstey Lane	..	..	..	..	..	20031

### *Area No. 4. Central.*

MISS K. CLARKE, S.R.N., S.C.M., 47, Princess Road	..	..	..	..	..	65475
MRS. LEDGER, S.C.M., 205, Birstall Street	..	..	..	..	..	20502

### *Area No. 5. Northern.*

MRS. CLARKE, S.C.M., 186, Canon Street Extension	..	..	..	..	..	61483
MRS. FEARN, S.C.M., 13, Perseverance Road, Birstall	..	..	..	..	..	84354
MRS. G. SMITH, S.C.M., 141, Catherine Street Extension	..	..	..	..	..	61664

### *Area No. 6. Humberstone.*

MRS. RIMMINGTON, S.C.M., 18, Mallory Place	..	..	..	..	..	27509
MRS. HOWARD, S.C.M., 7, Tailby Avenue	..	..	..	..	..	27273

### *Area No. 7. Spinney Hill.*

MRS. HURD, S.R.N., S.C.M., 34, Diseworth Street	..	..	..	..	..	65481
MISS E. REDHEAD, S.R.N., S.C.M., 6, Chesterfield Road	..	..	..	..	..	24088

### *Area No. 8. Stoneygate and Evington*

MISS MANSFIELD, S.C.M., 165, Clarendon Park Road	..	..	..	..	..	78085
--	----	----	----	----	----	-------

## Clerical Staff.

*Chief Clerk* .. .. . F. KELLETT.

### *General Clerks—*

T. P. POYNOR.	MISS D. R. POTTERTON.	MISS K. M. TUSTAIN.
E. SLINGSBY.	„ V. DAWN	„ E. E. BATTLE.
*G. H. SEAL.	„ V. NETHERCOT.	MRS. G. UTTING.
*R. FIELDMAN.	MRS. E. McCARTHY.	MISS D. I. MITCHELL
*D. BOUGHTON.	„ M. WARD.	„ J. OWEN.
*A. E. NORTHCOTE.	MISS L. HOLMES.	„ E. BLANSHARD.
	„ M. CRAWFORD.	H. FENSOME.

*Tuberculosis Dispensary* .. .. . { Miss J. HEATON.  
„ B. M. BOND.

### *Isolation Hospital and Sanatorium—*

*Steward* .. .. . H. I. REES.\*  
*Clerks* .. .. . { F. W. HYDE.  
L. H. REES.  
Miss V. ALLSOP.  
„ E. J. DODSON.  
„ A. M. NORTHCOTE.

### *City General Hospital—*

*Steward* .. .. . E. H. BALL.  
*Asst. Steward* .. .. . S. WHATSIZE.  
*Clerks* .. .. . { L. HEATHERLEY.\*  
Miss M. MILLIS.  
„ C. STONE.  
„ J. GUILLAIN.  
„ M. WENLOCK.  
„ D. E. WORTHINGTON.

*Milk Depot* .. .. . { MRS. BREWIN.  
„ E. HOLLAND.

*Vaccination Officer* .. .. . J. H. LOCKWOOD

\* On Active Service.

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# SUMMARY OF STATISTICS

FOR THE YEAR 1942.

## CITY OF LEICESTER.

Population at Census, 1931 .. .. .	239,169
„ (estimated) 1942 .. .. .	
Marriages .. .. .	
Births (corrected) .. .. .	
Birth-rate .. .. .	16.66
Deaths (corrected for transferable deaths) .. .. .	
Death-rate .. .. .	11.24
Deaths under One Year .. .. .	
Infant Mortality (per 1,000 Births) .. .. .	50.6
Maternal Mortality (per 1,000 total births) .. .. .	2.02
Zymotic-rate (per 1,000 population) .. .. .	0.38
Respiratory Disease death-rate .. .. .	
Cancer death-rate „ „ .. .. .	1.79
Tuberculosis death-rate „ .. .. .	
Phthisis-death-rate „ .. .. .	

Area of City (in acres) .. .. .	16,979
Number of persons per acre at Census, 1931 .. .. .	27.9
Number of persons per “structurally separate dwelling” at Census, 1931 .. .. .	3.80
Number of Inhabited Tenements, January, 1943 .. .. .	
Number of Empty Houses, January, 1943 .. .. .	
Number of Empty Cottages, January, 1943 .. .. .	
Rateable value (1942-1943) .. .. .	
General Rate for the year, 1942-1943 .. .. .	

	England and Wales	County Boroughs	London Adminis- trative County
Birth-rate .. .. .	15.8	17.3	14.0
Death-rate .. .. .	11.6	13.3	13.9
Infant Mortality (per 1,000 Births) .. .. .	49	59	60

(Registrar General's Figures.)



*To the Chairman, Lord Mayor and Members of the  
Health Committee.*

Mr. Chairman, my Lord Mayor, Ladies and Gentlemen,

I have the honour to submit herewith the Annual Report on the health of the City of Leicester for the year 1942.

STATISTICS.

BIRTH RATE. The birth rate shows a welcome improvement, but this fact has brought with it its difficulties. There is an acute shortage of maternity bed accommodation in the City. It is dangerous to overcrowd such accommodation and therefore on very frequent occasions our hospitals have had to refuse would-be patients.

DEATH RATE. Only once before in the history of the City has so low a rate been reported. It is a matter for deep satisfaction that a fourth year of war has not shown a very different picture.

INFANT MORTALITY. This rate, too, is low, and though not the lowest on record, nevertheless is evidence of a pleasing trend in the City's health.

PULMONARY TUBERCULOSIS. In spite of all forebodings the number of deaths from this cause is actually the lowest on record. It is true that notifications of all types and deaths from non-pulmonary disease are not so satisfactory, but the City can congratulate itself on the figures for 1942.

SCABIES. With the coming into operation of the Scabies Order, 1941, a clinic for both sexes and all ages was opened at the Granby Halls and has dealt with very large numbers of patients and contacts. It would appear that, at the time of writing, the spread of the disease has been checked.

The clinic is staffed entirely by part-time medical practitioners, and I am glad to place on record the co-operation we have received from them and from the whole-time staff of the clinic.

AMBULANCE SERVICE. In February, 1942, the Fire Brigade handed over to the Health Department what is now described as

the City Ambulance Service. This has enabled the City Civil Defence Casualty Service to obtain much valuable experience and was, I think, a step in the right direction, as an ambulance service is pre-eminently a medical rather than a Fire Brigade matter.

DAY NURSERIES. Several more Day Nurseries were established during the year. They are proving a very important addition to the Health Service. It is to be hoped that a Residential Nursery will be in operation in the near future; there is undoubtedly a need for one.

HOSPITALS. The usual excellent work of the City Hospitals has continued throughout the year, but to a certain extent, and especially at the Isolation Hospital, their efficiency has been frustrated by the shortage of staff—both nursing and domestic.

It is easy to understand that the man- (and woman,) power problem in this country is a very acute and difficult one, but a policy that does not take into the fullest account the importance of dealing with the sick and infective is not really in the national interest.

Finally, Mr. Chairman, I would like to express on behalf of the Department to you and to your colleagues our thanks for your continued interest and direction of our work. We appreciate your co-operation.

I am also very glad to bear testimony to the work of the staff, one and all. It has been, I feel, a happy year in spite of difficulties, and also not an unsuccessful one. It is a privilege to be a member of the Department.

I am,

Mr. Chairman, my Lord Mayor, Ladies and Gentlemen,

Your obedient Servant,

E. K. MACDONALD, M.D., B.S., D.P.H.,  
*Medical Officer of Health.*

Health Department,  
Grey Friars,  
Leicester.

9th September, 1943.

SECTIONS A., B., C. & D.

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# Statistics and Social Conditions



# ANNUAL REPORT, 1942

## SECTION A.

### Statistics and Social Conditions of the Area

#### Statistics.

Owing to the needs of Security all figures giving an indication of the number of the population are omitted, but reference to the rates given below will provide a good picture of the health of the city.

*Population:* 1942,               ; 1941,               ; 1940, 259,400.

*Births:* 1942, Males,               ; Females,               ; Total.  
          1941, Males,               ; Females,               ; Total,  
          1940, Males, 1,901; Females, 1,703; Total, 3,604.

*Birth Rate:* 1942, 16.66; 1941, 13.88.

*Infantile Mortality Rate:* 1942, 50.6; 1941, 55.0.

*Deaths:* 1942, Males,               ; Females,               ; Total.  
          1941, Males,               ; Females,               ; Total,  
          1940, Males, 1,941; Females, 1,813; Total, 3,754.

*Death Rates:* 1942, 11.24; 1941, 12.23.

#### Comments on the above Statistics.

*Population:* No comment.

*Infantile Mortality Rate.* An improvement on the figure for 1941 (55.0) and compares satisfactorily with the country as a whole (49). On only two occasions (1938 and 1939) has this rate been better than in 1942. This is very pleasing, especially when one takes into consideration the pressure on maternity beds that there has been of late.

The main causes of deaths were:—

(a) Prematurity and congenital causes	...	48%
(b) Diarrhœa	... ..	21%
(c) Lung diseases	... ..	15%

There was only one death from a notifiable infectious disease, viz., measles.

*Birth Rate.* This Rate, at 16.6, is the highest recorded since 1928.

*Death Rate.* 11.24. In contradistinction to the birth rate, the death rate for 1942 was nearly the lowest on record, only that for 1938 being slightly better. It is a matter for great congratulation that after three years of war, it is possible to report so satisfactorily on the state of the public health.

The death rate for Leicester is less even than that of the country as a whole (11.6) and markedly better than that for the aggregation of great towns and cities (13.3).

The main causes of death are dealt with below:—

### **Comments on the Incidence of and Mortality from certain Diseases.**

*Enteric Fever (Typhoid).* Only five notifications were received during the year and no death occurred. This compares with 29 cases and one death in 1941. Four of the five cases were paratyphoid "B" infection and the fifth case occurred among a family in which there had been the disease previously. In no case, however, could a definite causal infection be established and no carriers were found.

*Cerebro-Spinal Fever.* Notifications 77, deaths 9.

When first I came into personal contact with this disease, the mortality was literally appalling, but the use of better methods of treatment, notably the sulphonamide group of drugs, has altered the picture entirely.

The incidence of the disease in Leicester was rather higher than for the rest of the country as a whole.

*Scarlet Fever.* Notifications 551. Deaths nil.

These figures are practically the same as for last year (558 and 1).

*Whooping Cough.* Notifications 76. Deaths 1.

In 1941, there were 1,502 cases and 12 deaths, so 1942 proved itself to be an inter-epidemic year.

*Diphtheria.* Notifications 558. Deaths 8.

For the last few years the comparable figures are:—

		<i>Notifications.</i>		<i>Deaths.</i>		<i>Verified Case Mortality.</i>
1942	...	558	...	8	...	1.6%
1941	...	713	...	21	...	3.6%
1940	...	840	...	50	...	7.7%
1939	...	512	...	23	...	6.2%
1938	...	701	...	33	...	5.8%

It will thus be seen that though the incidence of the disease in 1942 was not appreciably lower than the average, the fatality rate was much better. In this connection it is worth noting that although a certain number of children who had been previously immunised contracted true diphtheria during the year and thus helped to swell the number of those cases notified, almost invariably the attack was mild in character and no immunised child died, a fact which again affects the case mortality rate. Had these children not been immunised, in all probability some of them would have died. No propagandist for Diphtheria Immunisation ever states that this process will give 100% immunity against the disease, for such is not the case; what we have emphasised over and over again in Leicester is that immunisation will give an enormously enhanced chance of escaping the disease altogether, that if the disease is unfortunately contracted, the attack will be a mild one, and that the risk of a fatal result is so small that it can be ignored. No reasonable individual could ask for more!

### **Diphtheria Immunisation.**

A vigorous campaign further to popularise Diphtheria Immunisation was conducted during the Autumn and met with considerable success. Steps have been taken to see that the campaign is not forgotten but is followed up appropriately. The main lines of propaganda were:—

(a) A birthday card with a suitable message was sent to all children on their first birthday.

(b) Special talks were given and facilities provided for Immunisation at the Infant Welfare Clinics.

(c) All the Health Visitors paid special attention to the campaign when meeting the mothers of their districts.



(d) All the parents of the children in the Infants' School, Junior and Senior and Secondary Schools up to the age of 15 years, received a special letter. The co-operation of the Education Department, the Teachers and the School Medical Staff was most appreciated.

(e) The Cinemas of the City were asked to show special Immunisation slides.

(f) The local Press published a weekly advertisement for approximately three months.

(g) The Clergy of all denominations collaborated, exhibited posters and mentioned the campaign from their pulpits.

(h) Special posters were shown in the Transport Department's vehicles.

(i) A new and more accurate record card index of all children in the City in the different age groups was established, by which it is hoped that further propaganda may be the more usefully instituted.

(j) Posters were exhibited in a large number of shops dealing in children's clothing.

(k) Medical Practitioners and Dentists of the City collaborated and displayed appropriate posters.

(l) The City Post Air-Raid Welfare Service distributed a large number of leaflets through the Divisional Welfare Officers.

The sincere thanks of the Department are due to all those who helped in the campaign.

### Immunisation Statistics.

	1942.		<i>Since start of Scheme.</i>	
	<i>Under 5.</i>	<i>Over 5.</i>	<i>Under 5.</i>	<i>Over 5.</i>
Total number of children completely immunised ... ..	3,500	2,494	13,806	11,435
Total number of children partially immunised ... ..	310	350		
Number of cases of genuine Diphtheria in immunised children ... ..	106		202	

## **Tuberculosis Deaths.**

*Pulmonary Tuberculosis.* Males, 107; Females, 60; Total, 167.

*Non-Pulmonary Tuberculosis.* Males, 14; Females, 25; Total, 39.

*Totals.* Males, 121; Females, 85; Total, 206.

The above figures are those given by the Registrar-General, but the matter is further dealt with in the Report of the Tuberculosis Officer on Page 18.

The total Tuberculosis deaths in 1942 at 206 are the second lowest in the history of the City, for only in 1938 were there less deaths from this disease (195). The pulmonary deaths actually constituted a low record!—167 as compared with 174 in 1938, and it was the increase in non-pulmonary disease that alone prevented 1942 breaking all records. Further discussion on this point will be found on Page 18 et seq.

*Influenza.* Deaths, 26. (1941, 32 deaths).

*Measles.* Notifications, 3,913. Deaths, 2.

Although there was a high incidence of this disease, the case mortality was satisfactorily low. The type of the disease was mild.

*Cancer.* The death rate was 1.79 as compared with 1.78 for 1941.

There was a slight increase in male and slight decrease in female deaths.

## **Heart and Vascular Diseases.**

As usual this group includes the largest numbers of deaths from any one cause, being responsible for 38% of the total deaths, the biggest majority being in the latter years of life.

### **Bronchitis.**

In 1940, 437 deaths occurred from this cause; in 1941, 200 deaths, and in 1942, 159. In 1942, 96 male and 63 female deaths occurred, again as for Heart disease, mainly in the latter years of life.

### **Pneumonia.**

109 deaths, 390 notifications. The improvement noted for bronchitis is also marked here.

## **Maternal Mortality.**

Notification of Puerperal Pyrexia, 114.

Deaths from Puerperal causes, 9.

The number of deaths is rather more than for 1941 and 1940, but the same as for 1939 and 1938.

See the report of the Maternity and Child Welfare Medical Officer on Page 58.

## **Deaths from Violence.**

### *Suicides:*

1942, Males, 18; Females, 21; Total, 39.

1941, Males, 23; Females, 17; Total, 40.

### *Road Accidents:*

1942, Males, 25; Females, 6; Total, 31.

1941, Males, 32; Females, 5; Total, 37.

Again there is the marked discrepancy between the sexes!  
Why is it so?

## **Other Violence.**

1942, Males, 33; Females, 36; Total, 69.

1941, Males, 39; Females, 44; Total, 83.



**SECTION B.**

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**General Provisions of Health  
Services for the Area**

## SECTION B.

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# General Provision of Health Services for the Area

### NO CHANGE

with the exception of the Ambulance Service and the Scabies Clinic.

Mr. L. Lee, City Ambulance Officer, reports on the City Ambulance Service as follows:—

*Report on the City Ambulance Service*  
*16th February to 31st December, 1942*

On receipt of Ministry of Health Circular No. 2502, dated the 19th November, 1941, wherein it was laid down that Ambulance Services, operating under the Fire Brigade Services should, if possible, be transferred to the Civil Defence Ambulance Service, arrangements were made with the Fire Service Authorities that the Civil Defence Ambulance Service should take over all ambulances held and operated by the Fire Brigade.

To this end the transfer was duly carried out and commenced working on the 16th February, 1942.

Five vehicles were handed over.

The staff necessary to run the Service under the new arrangements consisted of two Administrative Officers, a Maintenance Mechanic, Civil Defence Drivers and Attendants; the Drivers and Attendants being drawn from the existing personnel of the Aiding Depots, working a twenty-four hour shift for a period of three months after which time a change of personnel is made, excepting the Officers mentioned above.

The City Ambulance Service not only serves the City, but also areas of the County that are not covered by an existing Ambulance Service, e.g., St. John Ambulance Association, and the Service is maintained day and night.

### **Analysis of Calls Dealt with (16 Feb., 1942—31 Dec., 1942)**

Calls within the City boundary	...	...	6,763
Calls within the County	...	...	395

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Total	...	7,158
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Accidents in factories	...	...	...	241
Accidents and sudden illness in streets			...	763
Moving patients to and from Hospitals			...	6,005
Attempt suicides and D.O.A.'s	...	...	...	69
Cases where services were not required			...	80

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Total	...	7,158
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Total mileage covered on these cases amounts to 41,055 miles.

### **Scabies Clinic, Granby Halls.**

Following the coming into force of the Scabies Order, 1941, a new Clinic for the diagnosis and treatment of this disease was established at the Granby Halls First Aid Post, in the Gas Cleansing Section of the Post, and was opened on the 23rd February, 1942.

The Clinic is staffed by part-time medical practitioners who carry out between them ten sessions a week, i.e., morning and afternoon sessions each day of the week other than Saturday. Facilities are available for the examination and treatment of both males and females at each session.

With the opening of Granby Halls, the male clinic at Slater Street was discontinued.

In the main, Benzyl Benzoate method of treatment is used, though other preparations are available as desired by the medical officers. The doctors are helped by a whole-time staff consisting of a trained nurse, clerk, two female bath attendants, one male bath attendant, and a stoker. The staff of the Granby Halls Post provided the bath attendants on a rota basis in the first instance, but now they are whole-time in the clinic service. The co-operation between Post and Clinic has been most appreciated.



Class of Patient	New Cases definite cases of Scabies	Contacts examined and found not to be suffering from Scabies	Attendances of patients for examin- ation by Medical Officer and Treatment		Patients <b>Dis- charged</b> as cured
			Medical Officer	Treatment	
<b>Health Committee Patients :</b>					
Adult Males ....	327	212	799	1062	243
Adult Females ....	822	461	1867	1892	606
Children under 5 years of age ....	382	199	929	746	233
<b>Education Committee Patients :</b>					
Males ....	545	200	1646	2020	418
Females ....	563	223	1818	1879	450
<b>GRAND TOTAL</b>	<b>2639</b>	<b>1295</b>	<b>7059</b>	<b>7599</b>	<b>1950</b>

From an examination of the above Table certain facts emerge.

(1) 2,639 definite cases of Scabies attended at the Clinic and in all made 7,059 attendances for medical examination with in addition 7,599 attendances for treatment. Attendance for treatment in a large number of cases would be on the same day as the patient was seen by the doctor.

(2) The number of contacts found not to be suffering from Scabies, viz., 1,295, is a high proportion of attendances at the Clinic. This side of the work, though negative, is of importance in helping the control of the disease.

(3) The number of patients discharged as cured does not tally with the number of new patients admitted for treatment. There is undoubtedly a fairly large defaulter rate of patients who do not come up for final discharge. Every effort is made to encourage them to do so but the legal difficulties of compulsion are great.

SECTION C.

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**Sanitary Circumstances of  
the Area**

NO CHANGE.

## SECTION D.

# HOUSING

### Slum Clearance.

By the end of the year 1942 the following was the position of the scheme:—

(a) Old houses in scheme	...	...	...	...	5,155
(b) Old houses in scheme confirmed	...	...	...	...	3,835
(c) Population in (a)	...	...	...	...	16,648
(d) Population in (b)	...	...	...	...	12,534
(e) New houses required for (d)	...	...	...	...	4,960
(f) Number of old houses demolished	...	...	...	...	3,392
(g) Number of new houses already provided	...	...	...	...	2,859

Although it will be seen that considerable progress had been made before the war with the completion of the original scheme, it must not be forgotten that the original scheme does not now represent finality in Slum Clearance. After the present war when once again it will become possible to resume this work, a much greater number of houses will be represented as being unsuitable for habitation according to modern standards. This number of houses can provisionally be stated to be in the region of 16,000 houses and includes practically the whole of the central area with various outer areas.

### Overcrowding.

The undermentioned figures though “officially” reported do not, I feel, give a correct statement of the position of overcrowding in Leicester—there is undoubtedly a very real volume of crowding but without a fresh survey accurate figures are not available, and in any event the housing shortage does not render amelioration possible.

Number of overcrowded families requiring alternative accommodation on 1st January, 1942	...	...	139
Number of new cases of overcrowding during year	...	...	1
Number of cases of overcrowding relieved during the year	...	...	32
Number of families remaining overcrowded on 31st December, 1942	...	...	108



TABLE 14.  
**HOUSING STATISTICS**

For year ended 31st December, 1942.

**1.—Unfit Dwelling Houses—Inspection.**

(1) (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) .. ..	3958
(b) Number of inspections made for the purpose .. ..	5422
(2) (a) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 .. ..	1319
(b) Number of inspections made for the purpose .. ..	2468
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ..	1170
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-heading) found to be not in all respects reasonably fit for human habitation .. .. .	1747

**2.—Remedy of Defects without Service of Formal Notices.**

Number of defective dwelling houses rendered fit in consequence of informal action by Local Authority or their officers	1043
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**3.—Action under Statutory Powers.**

*A—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :*

(1) Number of dwelling houses in respect of which notices were served requiring repairs .. .. .	9
(2) Number of dwelling houses which were rendered fit after service of formal notices :	
(a) By owners .. .. .	9
(b) By Local Authority in default of owners .. ..	Nil

*B—Proceedings under Public Health Acts :*

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied .. ..	84
(2) Number of dwelling houses in which defects were remedied after service of formal notices :	
(a) By owners .. .. .	50
(b) By Local Authority in default of owners .. ..	Nil.

*C—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :*

(1) Number of dwelling houses in respect of which Demolition Orders were made .. .. .	1
(2) Number of dwelling houses demolished in pursuance of Demolition Orders .. .. .	Nil.

*D—Proceedings under Section 12 of the Housing Act, 1936 :*

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made .. ..	Nil.
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit .. ..	Nil.

# Report on the Tuberculosis Dispensary for 1942

By

WYVILLE S. THOMSON, M.D., D.P.H., Edin.,  
Tuberculosis Medical Officer.

## FOREWORD BY THE MEDICAL OFFICER OF HEALTH.

With the advent of war, all recent official pronouncements on the incidence of Tuberculosis have laid emphasis on the unfortunate increase in the notification rate and death rate from this disease, a state of affairs that appeared to be an inevitable concomitant of war-time conditions.

It is, therefore, all the more pleasing and perhaps one should say, all the more surprising that it is possible to record that in 1942, the deaths from pulmonary tuberculosis in Leicester created a new low record for the City and were less in number even than in our previously record year of 1938. Deaths from non-pulmonary disease, and notifications of all varieties do not show so satisfactory a state of affairs so there is no room for complacency, though notifications show some slight improvement on 1941.

Improved methods of diagnosis, improved methods of treatment and schemes for greater social security point the way of attack in the future.

# Report on the Tuberculosis Dispensary for 1942

by

WYVILLE S. THOMSON, M.D., D.P.H., Edin.,  
Tuberculosis Medical Officer.

Premises ; Staff ; No Change.

Number of Cases of Tuberculosis in the City (31st Dec., 1942).

PULMONARY.		NON-PULMONARY.		TOTAL CASES
Males	Females	Males	Females	
815	797	225	237	2,074

## New Cases Notified during 1942.

450 new cases of Tuberculosis were notified, of which 365 were Pulmonary and 85 Non-pulmonary. This is a decrease of 15 on last year's figures, when 390 Pulmonary and 75 Non-pulmonary were recorded.

The following table gives the number of new cases since 1918:—

1918	....	Pulmonary, 746 ;	Non-pulmonary, 82 ;	Total, 828
1919	....	„ 658 ;	„ 47 ;	„ 705
1920	....	„ 572 ;	„ 59 ;	„ 631
1921	....	„ 497 ;	„ 105 ;	„ 602
1922	....	„ 566 ;	„ 43 ;	„ 609
1923	....	„ 692 ;	„ 71 ;	„ 763
1924	....	„ 725 ;	„ 65 ;	„ 790
1925	....	„ 606 ;	„ 77 ;	„ 683
1926	...	„ 650 ;	„ 77 ;	„ 727
1927	....	„ 700 ;	„ 80 ;	„ 780
1928	....	„ 668 ;	„ 117 ;	„ 785
1929	....	„ 657 ;	„ 77 ;	„ 734
1930	....	„ 582 ;	„ 66 ;	„ 648



NEW CASES SINCE 1918—continued

1931	....	Pulmonary, 511 ;	Non-Pulmonary 61 ;	Total 572
1932	....	„ 442 ;	„ 69 ;	„ 511
1933	....	„ 438 ;	„ 74 ;	„ 512
1934	....	„ 331 ;	„ 72 ;	„ 403
*1935	....	„ 460 ;	„ 100 ;	„ 560
1936	....	„ 355 ;	„ 79 ;	„ 434
1937	....	„ 345 ;	„ 88 ;	„ 433
1938	....	„ 310 ;	„ 84 ;	„ 394
1939	....	„ 299 ;	„ 84 ;	„ 383
1940	....	„ 343 ;	„ 101 ;	„ 444
1941	....	„ 390 ;	„ 75 ;	„ 465
1942	....	„ 365 ;	„ 85 ;	„ 450

\*City Boundary extended and population increased by 20,000. The figure given for 1935 included 139 pulmonary and 23 non-pulmonary taken over from the County.

The following table gives the sex and age periods of those notified during 1942:—

Age Periods	0-1	1-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65 & up.	Total
Pulmonary												
Males ..	—	3	2	3	31	24	42	48	37	22	4	216
Females ..	—	2	7	6	29	37	30	18	9	7	4	149
Non-pulmonary												
Males ..	—	10	2	3	5	4	5	1	2	3	1	36
Females ..	—	5	7	5	15	4	4	2	5	1	1	49

The following table gives the number of young adults notified in the age periods 15-19 and 20-24 during the last eight years:—

Pulmonary Tuberculosis in Young Adults (Notifications)																
(15-24) during the past 8 years																
Ages.	1935		1936		1937		1938		1939		1940		1941		1942	
	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24
Males	18	24	18	27	21	9	20	17	32	19	17	20	27	24	31	24
Females	21	36	15	25	28	18	20	21	16	30	28	25	33	32	29	37
Total	39	60	33	52	49	27	40	38	48	49	45	45	60	56	60	61
Total bothsexes	99		85		76		78		97		90		116		121	

As this table shows, there has again been a further increase in Pulmonary Disease in young adults, in the age period 20-24. The totals for the age period 15-19 remain the same as last year.

## Deaths.

(Note.—The following figures for 1942 for deaths are those allocated locally.)

Deaths due to pulmonary tuberculosis	..	..	166
Deaths due to non-pulmonary tuberculosis	..	..	37
			<hr/>
Total number of deaths from tuberculosis	..	..	203
			<hr/>

These figures show a very satisfactory decline. As a matter of fact the pulmonary deaths (166) are the lowest ever recorded, and are a reduction of 31 on last year's figure. The non-pulmonary deaths are reduced by two.

<i>Death-rate per 100,000 :—</i>							1941	1942
Pulmonary	..	..	..	..	..	..		
Non-pulmonary		..	..	..	..	..		
Total death-rate	..	..	..	..	..	..		

### *Place of death :—*

City General Hospital	..	..	..	..	..	51
Groby Road Sanatorium		..	..	..	..	50
Other institutions	..	..	..	..	..	23
In patients' own homes		..	..	..	..	79
						<hr/>
						203
						<hr/>

**Number of Deaths from Tubercular Diseases  
in Leicester in past years.**

Year.	Phthisis.		Other Tuberculous Diseases.		Total Tuberculous Deaths.	
	Deaths.	Rate per 100,000 Population.	Deaths.	Rate per 100,000 Population.	Deaths.	Rate per 100,000 Population.
(1)	(2)	(3)	(4)	(5)	(6)	(7)
1931	262	108	49	20	311	129
1932	240	100	33	14	273	113
1933	269	111	32	14	301	125
1934	223	92	19	8	242	100
1935	234	91	18	7	252	98
1936	202	77	28	11	230	88
1937	216	82	35	13	251	95
1938	174	66	21	8	195	74
1939	183	70	25	9	208	79
1940	200	77	34	13	234	90
1941	197	—	39	—	236	—
1942	166	—	37	—	203	—

The following Tables give the Age, Sex Distribution and Occupations of those dying from Pulmonary Tuberculosis during 1942 :—

Age and Sex Distribution of Deaths from Phthisis in 1942.						
Age Period.			Males.	Females.	Total.	
0—1	..	..	1	—	1	
2—4	..	..	—	—	—	
5—9	..	..	—	—	—	
10—14	..	..	1	1	2	
15—19	..	..	6	11	17	
20—24	..	..	5	15	20	
25—34	..	..	22	13	35	
35—44	..	..	15	5	20	
45—54	..	..	33	6	39	
55—64	..	..	18	7	25	
65 and upwards	..	..	5	2	7	
All ages	..	..	106	60	166	



### Occupations of Persons Dying from Phthisis in 1942.

	M.	F.		M.	F.
SHOE TRADE :					
Finishers .. ..	3	—	Army Pensioners ..	1	—
Clickers .. ..	2	—	Boxmakers .. ..	—	—
Riveters .. ..	—	—	Porters .. ..	—	—
Pressmen .. ..	2	—	Licensed Victuallers ..	—	—
Machinists .. ..	—	1	Shop Assistants ..	3	1
Various .. ..	9	—	Warehousemen ..	2	—
			Various .. ..	38	2
Total in Shoes ..	16	1	Occupations not stated (includes Married Women, Widows, Children and Per- sons of no occupa- tion) .. ..	10	48
*Hosiery Trades ..	10	5			
Labourers .. ..	10	—			
Clerks .. ..	5	1			
Tailoring Trade ..	1	1			
Vanmen .. ..	1	—			
Soldiers .. ..	—	—	Grand Total ..	106	60
Engineers .. ..	8	1			
Painters .. ..	1	—			
Dressmakers .. ..	—	—			

\* A large number of *married* women are engaged in the Hosiery Trade, but these are not included, for in the case of deaths of married women and widows, only the husband's occupation is registered.

### ANALYSIS OF DEATHS.

PULMONARY CASES HAVING HAD INSTITUTIONAL TREATMENT.										
Stage when first examined			Died within one month of notification	Within two months	Within three months	Within six months	Within twelve months	Within 18 months	Within two years	Within three years Lived three years or over
T.B. - ve cases	9	.. ..	—	—	2	—	2	1	—	4
T.B. + ve Stage I.	29	..	—	—	—	1	3	2	1	19
T.B. + ve Stage II.	68	..	—	5	2	4	10	11	6	24
T.B. + ve Stage III.	23	..	3	4	3	7	—	2	—	4
Total	129	.. ..	3	9	7	12	15	16	7	51

Of the total 129 recorded in this table, 22 were treated at both Groby Road Sanatorium and the City General Hospital, 72 were treated at Groby Road Sanatorium only and 35 at the City General Hospital only.

PULMONARY CASES NOT HAVING HAD INSTITUTIONAL TREATMENT.										
Stage when first examined				Died within one month of notification	Within two months	Within three months	Within six months	Within twelve months	Within 18 months	Within two years
T.B. - ve cases. 7 .. ..				4	1	—	—	—	—	1
T.B. + ve Stage I. 1 ..				—	—	—	—	—	—	1
T.B. + ve Stage II. 8 ..				—	—	1	2	2	—	1
T.B. + ve Stage III. 2 ..				1	1	—	—	—	—	—
Total 18 .. ..				5	2	1	2	2	—	2

PULMONARY CASES NOT EXAMINED AT OR IN CONNECTION WITH THE DISPENSARY.

TOTAL	Died within one month of notification	Within two months	Within three months	Within six months	Within twelve months	Within 18 months	Within two years	Within three years	Lived three years or over
7	3	1	1	1	1	—	—	—	—

These tables account for 154 deaths. In addition there were 12 deaths of patients who have never been notified as suffering from Tuberculosis, one of whom became known to us through transferable deaths. This gives a total of 166 pulmonary deaths.

Deaths from Pulmonary Tuberculosis in Children (0-14)  
During the past eight years.

Ages.	1935			1936			1937			1938			1939			1940			1941			1942		
	-4	-9	-14	-4	-9	-14	-4	-9	-14	-4	-9	-14	-4	-9	-14	-4	-9	-14	-4	-9	-14	-4	-9	-14
Males	1	1	1	—	—	—	1	—	2	2	—	—	—	—	—	1	—	—	3	—	1	1	—	1
Females	4	—	1	1	—	—	—	—	1	—	—	2	—	—	1	—	—	—	—	1	—	—	—	1
Total	5	1	2	1	—	—	1	—	3	2	—	2	—	—	1	1	—	—	3	1	1	1	—	2
Total each year	8			1			4			4			1			1			5			3		

Three deaths of children 14 years of age or under from Pulmonary Tuberculosis have occurred during 1942, as compared with five for the preceding year.



**Deaths from Pulmonary Tuberculosis in Young Adults (15-24) during  
the past eight years.**

Ages.	1935		1936		1937		1938		1939		1940		1941		1942	
	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24
Males	5	10	3	6	3	12	7	6	7	5	2	7	7	7	6	5
Females	17	12	4	18	7	11	10	9	7	7	9	11	10	12	11	15
Total	22	22	7	24	10	23	17	15	14	12	11	18	17	19	17	20
Total	44		31		33		32		26		29		36		37	

It will be seen from this table that deaths of young adults from Pulmonary Tuberculosis still remains high. The figure (37) is one more than last year. As in previous years, deaths of females greatly exceed those of males, in both age periods.

**Non-Pulmonary Tuberculosis Deaths.**

Bones & Joints	Glands	Renal	Abdominal	Meninges	Miliary	Total
2	1	5	1	19	9	37

Of the 37 Non-Pulmonary deaths, 15 are known to have been in contact with one or more persons suffering from Pulmonary Tuberculosis.

Meningitis is again responsible for the greater proportion of these deaths, though the number (19) is a reduction of 6 on last year's figure. It will be seen from the following table that fewer children—11 as compared with 21—died from Meningitis.

Deaths from Tuberculous Meningitis in Children (0-14) during the past eight years								
	1935	1936	1937	1938	1939	1940	1941	1942
Males ..	4	9	3	6	4	5	10	6
Females	5	2	4	3	3	3	11	5
Total ..	9	11	7	9	7	8	21	11



Recovered Cases.

During the past year the names of 87 patients were removed from the register as having "recovered." Of these 63 were pulmonary and 24 were non-pulmonary.

Table 1.  
ANALYSIS OF CASES ON DISPENSARY REGISTER.

DIAGNOSIS	Pulmonary				Non-Pulmonary				Total				Gr'd T'ls.	
	Adults		Children		Adults		Children		Adults		Children			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A. New Cases examined during the year excluding contacts:—														
(a) Definitely Tuberculous ..	155	100	2	7	16	22	8	8	171	122	10	15	318	
(b) Diagnosis not completed ..	—	—	—	—	—	—	—	—	37	28	10	10	85	
(c) Non - Tuberculous .. ..	—	—	—	—	—	—	—	—	307	368	50	64	789	
B. Contacts examined during the year:—														
(a) Definitely Tuberculous ..	6	6	4	7	—	—	—	—	6	6	4	7	23	
(b) Diagnosis not completed ..	—	—	—	—	—	—	—	—	4	11	25	24	64	
(c) Non - Tuberculous .. ..	—	—	—	—	—	—	—	—	47	87	56	73	263	
C. Cases written off Dispensary Register:—														
(a) Recovered ..	28	30	2	3	8	6	7	3	36	36	9	6	87	
(b) Non - Tuberculous ..	—	—	—	—	—	—	—	—	379	485	131	142	1137	
D. Number of Cases on Dispensary Register on December 31st:														
(a) Definitely Tuberculous ..	700	528	46	45	148	159	75	75	848	687	121	120	1776	
(b) Diagnosis not completed ..	—	—	—	—	—	—	—	—	76	60	41	42	219	
1. Number of cases on Dispensary Register on January 1st .. .. .			1,892		2. Number of cases transferred from other areas and cases returned after discharge .. ..			42						
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" ..			87		4. Cases written off during the year as dead (all causes) .. .. .			170						
5. Number of attendances at the Dispensary ..			10,377		6. Number of Insured Persons under Domiciliary Treatment on December 31st .. .. .			70						
7. Number of consultations with medical practitioners. (a) Personal .. .. (b) Other .. ..			38 764		8. Number of visits by Tuberculosis Officers to homes of patients for the purpose of examination			337						
9. Number of visits by Nurses to homes for Dispensary purposes ..			7,205		10. Number of : (a) Specimens of sputum .. .. (b) X-ray examinations made in connection with Dispensary work			1,741 2,166						
11. Number of "recovered" cases restored to the Dispensary Register ..			6		12. Number of "T.B. plus" cases on Dispensary Register on December 31st			794						

## Tuberculosis Dispensary as the "Centre for Diagnosis"

Notes from doctors requesting an opinion on 764 patients were received and dealt with during the past twelve months. In addition many patients, not under medical attention, called on their own initiative desiring to know whether they had consumption.

Clinical Examinations	Men	Women	Children	Total
First examinations ..	521	565	323	1,409
Re-examinations ..	1,181	1,091	611	2,883

"Contact" Examinations.	1941	1942
Number of "contacts" examined .. ..	435	350
Number found to be definitely tuberculous	13	23

## Bacteriological Examinations.

Nature of Specimen	Positive	Negative	Total
Specimens of Sputum :—			
From Practitioners .. ..	41	360	401
From Patients examined at the Dispensary .. .. .	358	967	1,325
Specimens other than sputum ..	—	15	15
Total ..	399	1,342	1,741

## Radiological Examinations.

Radiological examinations carried out at	1941	1942
Groby Road Sanatorium .. ..	1,527	2,166

## Treatment.

At Groby Road Sanatorium :	Adults.	Children.
Pulmonary .. .. .	293	74
Non-pulmonary .. .. .	16	9
At City General Hospital :		
Pulmonary .. .. .		60
Non-pulmonary .. .. .		45
At Tuberculosis Dispensary :		
Domiciliary Treatment .. .. .		90
Patients receiving treatment at end of year ..		70
Quarterly reports received from panel doctors		152

### Attendances.

Total number of attendances at Dispensary .. 10,377

### Visits.

Visits paid by Tuberculosis Officers for	
purpose of examination .. ..	337
Ditto. Dispensary Nurses .. ..	7,465
Ditto. District Nurses .. ..	2,543

### Additional Nourishment.

Free milk — generally one pint daily — has been granted to necessitous patients whose income falls below a certain scale, During the year 20 patients were assisted in this way, at a total cost of £111 12s. 5d.

Certificates were granted to many cases with active Tuberculosis in order to enable them to obtain an additional allowance of milk for which they were able to pay.

### After-Care.

After-care work has been carried on as previously, and a close contact is maintained with every patient as long as his name remains on the Dispensary Register. £8 7s. 1d. has been spent in clothing, etc., for necessitous patients undergoing institutional treatment. Gifts of clothing, etc., have also been received by the Nurses and distributed to the poorer patients.

WYVILLE S. THOMSON.



# Report on the Isolation Hospital and Sanatorium for the year 1942

By

J. C. HAMILTON MACKENZIE, M.D. (Glas.), D.P.H. (Lond.)  
Medical Superintendent.

## FOREWORD BY THE MEDICAL OFFICER OF HEALTH.

The work of this Hospital during 1942 seems to have had a continual background of staff troubles. The work has been seriously curtailed by deficiencies both in the nursing and domestic staff. Every effort has been made by the Committee to improve this state of affairs, visits have been paid to the Ministry of Health, London, representations made to local Members of Parliament and to the local office of the Ministry of Labour and National Service, but all to little effect. The deficiency of staff and the consequent waiting list of patients (on the tuberculosis side) still remain.

In spite of these troubles, a large volume of excellent work has been carried out. I would draw special attention to the following points:—

*Scarlet Fever.* Only 73 patients were admitted as compared with 260 in 1941.

*Diphtheria.* The number of admissions was not materially different from 1941, but the mortality is markedly better.

*Tuberculosis.* The turn-over of tuberculosis patients was increased, and in addition more beds have been devoted to this side of the work. The waiting list, nevertheless, is still very high.

*Puerperal Pyrexia.* The number of admissions (82) was nearly double that for 1941 (46).

*Laboratory.* The co-operation between the Department and the Laboratory of the Emergency Public Health Service is a matter of great satisfaction.

# Report on the Isolation Hospital and Sanatorium for the year 1942

By

J. C. HAMILTON MACKENZIE, M.D. (Glas.), D.P.H. (Lond.)  
Medical Superintendent.

The following is an abridged report on the work in the hospital for the year 1942:—

Disease.	Remaining 31st Dec., 1941.	Admitted.	Discharged.	Died.	Remaining 31st Dec., 1942.
Scarlet Fever ...	2	73	72	—	3
Diphtheria ...	90	653	669	8	66
Tuberculosis ...	188	384	310	45	217
Tub. Observation Cases ...	11	72	78	—	5
Measles ...	—	53	41	1	11
Enteric ...	—	8	7	—	1
Erysipelas ...	—	9	9	—	—
Puerperal Pyrexia	2	82	79	1	4
C.M.S. ...	3	102	95	8	2
Whooping Cough	1	3	3	1	—
Pneumonia ...	1	8	7	—	2
Other Diseases	2	181	162	16	5
Dysentery ...	—	10	10	—	—
T.B. Meningitis	—	8	—	8	—
Poliomyelitis ...	1	10	10	1	—
Staff ...	2	65	64	—	3
	303	1721	1616	89	319

## SCARLET FEVER.

Cases admitted	....	....	....	....	....	73
Cases discharged	....	....	....	....	....	70
Verified cases discharged	....	....	....	....	....	55
Altered diagnosis	....	....	....	....	....	15
Deaths	....	....	....	....	....	Nil

**Cross Infections :**

Varicella ....	....	....	....	....	....	1
Parotitis ....	....	....	....	....	....	1
Return cases	....	....	....	....	....	Nil
Number of cases receiving no serum	....	....	....	....	....	7

**Complications :**

Otorrhœa	....	....	....	....	....	4
----------	------	------	------	------	------	---

**Comments**

Only a small number of cases of Scarlet Fever were admitted, and this is not a true reflection of the incidence of the disease in the city. Throughout the year Scarlet Fever was not admitted as routine; this action had to be taken on account of the shortage of nursing staff.

The disease was of the mild type and no deaths occurred.

**DIPHTHERIA.**

Cases admitted	....	....	....	....	....	653
Cases discharged	....	....	....	....	....	666
Verified cases discharged	....	....	....	....	....	492
Altered diagnosis	....	....	....	....	....	164
Deaths	....	....	....	....	....	8
Death rate	....	....	....	....	....	1.6%

**Concurrent Infections :**

Chicken Pox	....	....	....	....	....	2
Mumps	....	....	....	....	....	1

**Cross Infections :**

Chicken Pox	....	....	....	....	....	6
Scarlet Fever	....	....	....	....	....	1

**COMPLICATIONS :**

Paralysis of Heart (severe)	....	....	....	....	....	6
„ „ (slight)	....	....	....	....	....	11
„ Palate	....	....	....	....	....	40
„ Ciliary muscles	....	....	....	....	....	7
„ External ocular muscles	....	....	....	....	....	6
„ Pharynx	....	....	....	....	....	3
„ Limbs	....	....	....	....	....	2
Peripheral Neuritis	....	....	....	....	....	2



**Classification of Types of Diphtheria Germs :**

Gravis	....	....	....	....	....	338
Intermediate	....	....	....	....	....	78
Mitis	....	....	....	....	....	55
Atypical	....	....	....	....	....	15

**Mortality amongst Different Groups**

Type of Disease	Number of Cases	Deaths	Mortality of the Group
Group A. Early (Severe) Late	24 24	1 5	4.1 per cent. 20.8 per cent.
Group B. Early (Moderately Severe) Late	95	—	
Group C. (Mild)	252	—	
Laryngeal	2	2	100 per cent.
Nasal	22	—	
Bacteriological	82	—	

**Type of Infecting Organism producing fatal cases:**

Gravis	...	...	...	...	...	...	...	6
Intermedius	...	...	...	...	...	...	...	1
Mitis	...	...	...	...	...	...	...	—

**Comments.**

The number of cases of Diphtheria discharged throughout the year remained high, but shows a fall from the year 1941, i.e., 662 verified cases discharged in 1941, 492 in 1942.

The outstanding feature of the above figures is that there were 8 deaths during the year, giving a case mortality rate of 1.6%; this is the lowest recorded rate since the hospital was opened in 1900.

The previous lowest rate was in 1935 with a figure of 2%. The case mortality rates from 1935 are as follow:—

1936	...	...	...	...	2.5%
1937	...	...	...	...	5.2%
1938	...	...	...	...	5.8%
1939	...	...	...	...	6.2%
1940	...	...	...	...	7.7%
1941	...	...	...	...	3.6%
1942	...	...	...	...	1.6%

An outbreak of severe Diphtheria associated with the “gravis” type of organism commenced in Leicester in September, 1937. From that date the predominant type of organism has been “gravis.”

The epidemic reached its peak in 1940, when 712 cases were discharged; the case mortality being 7.7%.

Since 1940 the case mortality has decreased. These figures indicate the increasing immunity in the city against the “gravis” type of infection.

#### PUERPERAL PYREXIA

Cases discharged : 78.

				Puerperal	Abortal
1941	....	....	....	43	38
1942	....	....	....	49	30

#### Verified Classification of Puerperal Pyrexia :

Infections of the genital tract	....	....	....	34
Urinary infections	....	....	....	3
Mastitis	....	....	....	3
Phlebitis	....	....	....	3
Tuberculosis	....	....	....	1
Retained products of conception		....	....	1
Reactionary temperature	....	....	....	1
Pyrexia of unknown origin	....	....	....	3
				—
				49
				—

#### Infections of the genital tract :

Infections with streptococcal haemolyticus	12	(34%)
Infections with other organisms	.... 22	(66%)

All streptococcal cases responded to sulphonamides except one case of thrombophlebitis, which finally recovered.

All were sporadic except for four cases from an outbreak at one of the local hospitals.

## OTHER INFECTIOUS DISEASES

Diseases.	Verified Cases (discharged).	Deaths.
Acute Aseptic Meningitis ...	8	—
Dysentery ... ..	9	—
Enteritis ... ..	24	—
Erysipelas ... ..	11	—
Laryngitis ... ..	2	2
Influenzal Meningitis ...	2	—
Meningococcal Meningitis ...	53	3
Measles ... ..	41	1
Pneumonia ... ..	8	—
Pharyngitis ... ..	3	—
Parotitis ... ..	32	—
Poliomyelitis ... ..	6	1
Pneumococcal Meningitis ...	3	3
Rubella ... ..	5	—
Scabies ... ..	2	—
Staphylococcal Septicaemia ...	1	1
Tonsillitis ... ..	21	—
Typhoid ... ..	3	—
T.B. Meningitis ... ..	8	8
Varicella ... ..	11	—
Whooping Cough ... ..	4	1
Vincent's Infection ... ..	4	—
Babies admitted with Mothers	46	—
Other Diseases ... ..	72	15
Staff ... ..	29	—

## TUBERCULOSIS.

384 classified cases of tuberculosis were admitted to the hospital, 310 discharged, 45 died.

### Special Treatment for Pulmonary Tuberculosis carried out in the Sanatorium during 1942.

#### Thoracic Surgical Operations carried out by Thoracic Surgeon :—

Thoracoplasty (1st stage) ... ..	10
Thoracoplasty (2nd stage) ... ..	6
Thoracoplasty (3rd stage) ... ..	4
Thoracoscopy and Adhesion Section ... ..	1
Phrenic Operations ... ..	24
Adhesion Sections ... ..	14
Thoracoscopy ... ..	13
Bronchoscopy ... ..	11
Monaldi ... ..	10
Other ... ..	3



### Artificial Pneumothorax :

New cases induced	...	...	...	...	...	102
Refills (In-patients) ...	...	...	...	...	...	2460
Refills (Out-patients)	...	...	...	...	...	3233
						<hr/> 5795 <hr/>

Aspirations and Pleural Lavage (In-patients)	...	...	...	...	100
"    "    "    "    (Out-patients)	...	...	...	...	48
Gold Injections	...	...	...	...	817
Blood Examinations	...	...	...	...	1770

### Comments.

The volume of work in the treatment of Pulmonary Tuberculosis continues to increase.

The Thoracic Surgical Unit forms an integral and essential part in the treatment of Tuberculosis.

The number of special operations to produce healing of this disease continues to be augmented.

The unit still continues to perform minor thoracic surgical operations for the Leicestershire County Council, and the difficulty in bed accommodation and shortage of nursing staff at the present moment prevents an increase of work in this field

### OPERATING THEATRE :

In addition to the Thoracic surgical operations, Aspirations and Pneumothoraces, the following operations were carried out in the hospital:—

Tonsillectomy	...	...	...	40
Mastoidectomy	...	...	...	22
Amputation of leg	...	...	...	1
Appendicectomy	...	...	...	1
Glands of neck	...	...	...	4

## X-RAY DEPARTMENT.

	In-patients.	Out-patients.	Total.
Chest Films ... ..	2076	2768	4844
Lipiodal Examinations (chest)	69	—	69
N.S.M.B. Films ... ..	—	244	244
Screen Examination, (chest)	2465	3362	5827
Ante-Natal Films ... ..	—	50	50
Dental ... ..	3	—	3
Staff ... ..	148	—	148
C.N.R. Staff ... ..	—	35	35
E.M.S. Films ... ..	—	51	51
Leicester Frith ... ..	—	8	8
City Mental Hospital ... ..	—	4	4
Films of bones and joints	31	275	306
Mobile Unit ... ..	19	—	19
Barium Meal ... ..	2	—	2
Sinuses ... ..	9	—	9
	<hr/> 4822 <hr/>	<hr/> 6797 <hr/>	<hr/> 11619 <hr/>

## DENTAL CLINIC

Extraction Cases ... ..	162
Filling Cases ... ..	5
Consultations ... ..	6
Examinations ... ..	105
Impression for Dentures ... ..	10

## LABORATORY

During the year co-operation was established with the Emergency Public Health Service Laboratory, whose personnel now occupy the hospital laboratory.

The E.P.H.S.L. are now responsible for all bacteriology and investigations associated with the hospital and the city.

The clinical pathology of the hospital is performed under the direction of the Pathologist to the laboratory situated at the City General Hospital.

J. C. H. MACKENZIE.

# **Report on the City General Hospital, Leicester, for the year 1942**

By

A. P. M. PAGE, M.D., B.S.(Lond.), M.R.C.P.(Lond.)  
D.C.H.(R.C.P. & S.)

Medical Superintendent and Physician.



# Report on the City General Hospital, Leicester, for the year 1942

By

A. P. M. PAGE, M.D., B.S. (Lond.), M.R.C.P. (Lond.),  
D.C.H. (R.C.P. & S.)

Medical Superintendent and Physician.

I herewith submit an abridged report covering the activities of the various Departments of the Hospital.

Substantial alterations to the Operating Theatres on Wards 6, 9 and 13 are in progress, and a new Laboratory block is being erected between wards 11 and 14. The completion of this work will enhance the Surgical and Pathological Services of the Hospital.

The admission of patients continues to be over 6,000 per annum, although there has been a decrease on the previous figure, owing to the limitation of midwifery bookings.

There have been several changes in the Medical Staff; Dr. R. S. Wale has taken charge of the Laboratory in the place of Dr. E. M. Ward, who resigned after many years' service; Mr. D. R. Cairns, M.R.C.O.G., has taken charge of the Obstetrical and Gynaecological Department. The Visiting Staff has been increased by the appointment of Mr. Lawson, Mr. Barrett, and Mr. McGavin for surgical duties, and Mr. Lodge for Obstetrical and Gynaecological duties. Mr. McCurry, Ophthalmic Surgeon, joined the R.A.F. in a Specialist capacity and his place has been temporarily filled by Mrs. Souper, D.O.M.S.

I should like to take this opportunity of expressing my thanks to all the members of the various Departments of the Staff for their valuable services, and especially to name the following voluntary workers for their continued assistance: Miss M. Elkins, Ph.D., Biochemist, and Mrs. York and Miss Goddard, Librarians.

## GENERAL STATISTICS.

	1941	1942
Accommodation of Hospital expanded is 700 Beds.		
Admissions ... ..	6,497	6,130
Discharges ... ..	5,992	5,659
Deaths ... ..	501	478
Deaths occurring within seven days of admission ... ..	202	180
Number of Patient Days ... ..	174,307	175,240
Average duration of residence (in days) ... ..	26.83	28.59
Average number of beds occupied ... ..	477.553	480.110
Highest—On 12.3.41 ... ..	535	—
On 27.3.42 ... ..	—	540
Lowest—On 12.1.41 ... ..	426	—
On 9.8.42 10.8.42 11.8.42 ... ..	—	407
Post Mortem Examinations held ... ..	187	195
Inquests held ... ..	12	5
Operations performed ... ..	1,158	1,244
Dental extractions ... ..	114	131
Blood Transfusions given ... ..	231	189
X-Ray films exposed ... ..	6,785	6,524
Electrocardiographic Examinations ... ..	65	69
Confinements ... ..	1,091	906
Laboratory figures :—		
Pathological Investigations ... ..	21,294	22,720
Serological Examinations ... ..	2,476	2,206
Massage Department—Treatments given ... ..	10,110	12,702

## STATISTICAL TABLE.

Showing progress in Special Departments in the past 9 years.

	1934	1935	1936	1937	1938	1939	1940	1941	1942
Admissions ..	2,878	2,801	3,357	4,065	4,182	4,581	6,142	6,497	6,130
Average stay in Hospital days	54.3	52.5	47	46.7	36.98	30.86	26.99	26.83	28.59
Confinements	205	231	222	339	552	728	895	1,091	906
Operations Performed ..	223	351	587	621	852	1,001	1,082	1,158	1,244
X-Ray Films Exposed ..	3,397	3,175	3,792	3,667	4,397	4,306	5,798	6,785	6,524
Pathology ..	2,850	5,011	7,247	6,486	8,521	8,794	12,750	21,294	22,720
Massage ..	—	—	—	—	2,452	3,393	7,790	10,110	12,702
Average No. of beds filled ..	377	424	427	433	423	386	453	478	480

## SUMMARY OF YEARLY RETURN OF CASES.

	Remaining on 31/12/41	Admitted	Discharged	Died	Remaining on 31/12/42
Men .. ..	189	1915	1696	227	181
Women ..	127	2440	2304	132	131
Children (under 16 years) ..	138	1775	1659	119	135
Totals .. ..	454	6130	5659	478	447

## LABORATORY REPORT FOR 1942.

The work of the laboratory has maintained its progress, the total investigations carried out for 1942 being 22,720, compared with 21,294 for 1941.

There have been several changes in the staff; Dr. Ward, who resigned in September, was succeeded by Dr. R. S. Wale as Pathologist, with Dr. Dobrashian continuing as Assistant Pathologist. Mr. Cridland, Senior Technician, resigned in August, and Miss L. Barnes was appointed to the vacancy which occurred through the promotion of Mr. Hayes to Senior Technician. William Green, Laboratory Boy, was called up into the R.A.F., and was replaced by Ronald Ayres. Miss M. Elkins, Ph.D., has continued her voluntary work as a biochemist.

The new laboratory is nearing completion and it is anticipated that it will come into use early in the New Year.

General Examinations	...	...	...	...	...	20,682
Histological Examinations	...	...	...	...	...	513
Specimens examined for other Institutions	...	...	...	...	...	296
Blood Donors used	...	...	...	...	...	1,229
Blood Transfusions given	...	...	...	...	...	189
Specimens examined at City Isolation Hospital for the City						
General Hospital	...	...	...	...	...	1,929
Ascheim Zondeck tests performed at Edinburgh University						
for the City General Hospital	...	...	...	...	...	16
Post Mortems performed	...	...	...	...	...	195
Wassermann Reactions tested at Leicester Royal Infirmary						
for City General Hospital	...	...	...	...	...	322



## MATERNITY AND GYNAECOLOGY DEPARTMENT.

### Ante-Natal Clinic

		1940	1941	1942
Total number of first examinations	..	806	1097	880
Total number of attendances	.. ..	3937	6206	4854

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Number of Maternity Beds provided	..	—	—	4
Number of Cases Delivered	.. ..	895	1091	906
Number of cases notified as Puerperal Pyrexia		—	—	20
Number of cases notified as Ophthalmia				
Neonatorum	.. .. .	—	—	3
Maternal deaths	.. .. .	—	—	2

### Causes of Maternal Deaths

1. Morbidly Adherent Placenta; Toxaemia of Pregnancy			
2. Pulmonary Embolism; Pyelitis; Diabetes Mellitus			
Infant deaths in children born in hospital	...	...	31

### Causes of Infant Deaths

Prematurity	... ..	21
Broncho Pneumonia	... ..	2
Volvulus of Gut	... ..	1
Insufficient vitality, partial atelectasis of lungs	... ..	2
Enteritis (B. Sonnei)	... ..	1
Congenital Heart Abnormality	... ..	1
Congenital Malformation	... ..	1
Imperforate Anus	... ..	1
Renal Haemorrhage	... ..	1
Still births	... ..	34

### Abnormal Deliveries

Face Presentation	... ..	5
Breech Presentation	... ..	35
Forceps Deliveries	... ..	39
Caesarean Sections	... ..	7
Retained Placenta	... ..	6

Ante-natal cases admitted for treatment	... ..	194
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### Gynaecology

Total number of patients admitted	... ..	248
Abortions	... ..	121
Miscellaneous	... ..	127

<b>Gynaecological Operations</b>	...	...	...	...	...	...	212
Sub-total Hysterectomy	...	...	...	...	...	...	7
Total Hysterectomy	...	...	...	...	...	...	5
Myomectomy	...	...	...	...	...	...	8
Salpingectomy	...	...	...	...	...	...	8
Ovarian Tumour	...	...	...	...	...	...	3
Ovarian Cyst	...	...	...	...	...	...	12
Parovarian Cyst	...	...	...	...	...	...	1
Colporrhaphy	...	...	...	...	...	...	13
Ruptured Ectopic	...	...	...	...	...	...	4
Hysteropexy	...	...	...	...	...	...	4
Evacuation Uterus	...	...	...	...	...	...	31
Curettage	...	...	...	...	...	...	75
Hysterotomy and Sterilisation	...	...	...	...	...	...	2
Sterilisation	...	...	...	...	...	...	2
Salpingography	...	...	...	...	...	...	13
Bartholin's Cyst (Excision)	...	...	...	...	...	...	3
Pre-sacral Neurectomy	...	...	...	...	...	...	1
Repair rectovaginal fistula	...	...	...	...	...	...	1
Laparotomy	...	...	...	...	...	...	3
Vaginal Hysterectomy	...	...	...	...	...	...	1
Minor operations	...	...	...	...	...	...	14

### TABLE OF OPERATIONS.

General	...	...	...	...	...	...	...	970
I. Abdominal	...	...	...	...	...	...	...	369
II. Kidney and Genito-Urinary	...	...	...	...	...	...	...	89
III. Respiratory	...	...	...	...	...	...	...	32
IV. Bones	...	...	...	...	...	...	...	31
V. Gynaecological	...	...	...	...	...	...	...	271
VI. Ear, Nose and Throat, and Eyes	...	...	...	...	...	...	...	79
VII. Head	...	...	...	...	...	...	...	4
VIII. Miscellaneous	...	...	...	...	...	...	...	95
Dental Extractions, Examinations, Fillings and Impressions	...	...	...	...	...	...	...	199
Blood Transfusions	...	...	...	...	...	...	...	189
Orthopaedic Operations	...	...	...	...	...	...	...	274
Anaesthetics Administered	...	...	...	...	...	...	...	1,333

### SURGICAL CASES

Alimentary System	...	...	...	...	...	...	398
Genito-Urinary System	...	...	...	...	...	...	108
Mouth, Ear, Nose and Throat	...	...	...	...	...	...	181
Eye	...	...	...	...	...	...	14
Bones, Joints and Fibrous Tissue	...	...	...	...	...	...	61
Respiratory	...	...	...	...	...	...	11
Orthopaedic	...	...	...	...	...	...	187
Malignant Growths	...	...	...	...	...	...	97
Miscellaneous	...	...	...	...	...	...	190

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1,247

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## MEDICAL CASES

General Infections	...	...	...	...	...	...	185
Respiratory Disorders	...	...	...	...	...	...	852
Diseases of Nervous System	...	...	...	...	...	...	148
Diseases of Heart and Circulation	...	...	...	...	...	...	305
Mental Disorders	...	...	...	...	...	...	64
Metabolic and Endocrinal Disorders	...	...	...	...	...	...	42
Nutritional and Congenital Defects	...	...	...	...	...	...	48
Intoxications, Poisonings, etc.	...	...	...	...	...	...	7
Kidney Diseases	...	...	...	...	...	...	99
Venereal Diseases	...	...	...	...	...	...	5
Bones, Joints, Fibrous Tissues and Glands	...	...	...	...	...	...	150
Digestive System, Disorders of	...	...	...	...	...	...	220
Diseases of Skin	...	...	...	...	...	...	777
Blood Disorders	...	...	...	...	...	...	50
							<hr/> 2,952 <hr/>

## ANALYSIS OF CAUSES OF DEATH.

General Infections	...	...	...	...	...	...	10
Respiratory System	...	...	...	...	...	...	111
Circulatory System	...	...	...	...	...	...	84
Nervous System	...	...	...	...	...	...	35
Mental	...	...	...	...	...	...	—
Metabolic and Endocrinal Disorders	...	...	...	...	...	...	12
Nutritional and Congenital	...	...	...	...	...	...	37
Poisonings and Intoxications, etc.	...	...	...	...	...	...	—
Kidney	...	...	...	...	...	...	53
Digestive System	...	...	...	...	...	...	—
Diseases of the Blood	...	...	...	...	...	...	18
Alimentary System	...	...	...	...	...	...	80
Diseases of Genito-Urinary System	...	...	...	...	...	...	10
Ear, Nose and Throat	...	...	...	...	...	...	5
Bones and Joints	...	...	...	...	...	...	5
Maternity and Gynaecological	...	...	...	...	...	...	12
Orthopaedic	...	...	...	...	...	...	1
Skin	...	...	...	...	...	...	3
Miscellaneous	...	...	...	...	...	...	2
							<hr/> 478 <hr/>



**Report on  
Maternity and Child Welfare**  
for the year 1942.

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## **STAFF.**

### **Medical Staff.**

Dr. Peters resigned on the 28th February, having been appointed to a senior post at Northampton. He was replaced by Dr. Lichtenstein, who commenced his duties on 23rd March, 1942.

Dr. Margaret Hird was called up for service with the Army on 5th September, and Dr. Annys Cusack on 12th December. No whole-time officers have been engaged to replace them, but arrangements have been made with local Practitioners to undertake their work on a sessional basis.

### **Health Visitors.**

Miss Ruth White resigned on the 27th January to take up the post of Superintendent Health Visitor at Middlesbrough. Miss Frances Keynes resigned on the 15th June to take up a Health Visitor's post in London. Miss Hurst resigned on the 29th June to return to Health Visiting in London. Miss Patricia Newton resigned in August to enter the R.A.F. Nursing Service. Miss H. Dolan resigned on 30th November to return to London and has since secured an appointment as Technical Adviser to the National Society of Children's Nurseries. Miss K. Porter resigned on the 30th November to take up Health Visiting in London. Miss B. E. Turner resigned on the 19th December to take up Queen's Nursing.

Miss J. M. Dracass, the Diphtheria Immunisation Nurse, resigned on the 31st October, following her marriage, and ceased her work in the Department at the end of December.

During the year, the following Health Visitors were appointed to the Department: Miss D. M. Abbott, Miss D. Atkin, Miss P. J. Archibald. Mrs. Grainger replaced Miss Dracass.

The remaining vacancies were filled during the early part of 1943.

The services of the temporary Health Visitor were discontinued during the year under review.

### Midwives.

Miss D. L. Buckley resigned on the 20th June, following her marriage, and Miss Marion F. Elliott on the 1st November, for personal reasons.

Miss Buckley was replaced by Miss A. Byrne and Miss Elliott by Miss K. Clarke.

The following is a statistical report of the work done by the Health Visitors during 1942:—

### Health Visiting.

(Corresponding figures for the previous year are shown in brackets)

Number of first visits to children under one year old	4,172	(3,592)
„ „ revisits to children under one year old ..	17,037	(19,538)
„ „ visits to children one to five years old ..	26,176	(30,213)
„ „ visits to cases of Ophthalmia Neonatorum	23	(40)
„ „ first visits to ante-natal cases .. ..	915	(924)
„ „ other visits to ante-natal cases .. ..	157	(255)
„ „ visits to children under Infant Life Protection Act .. .. .	1,042	(980)
„ „ other visits (no access) .. .. .	8,213	(10,901)
„ „ „ „ (not classified) .. .. .	2,243	(2,692)
Totals .. .. .	59,978	(69,135)

The total figures show that the increase in the amount of district visiting which had been possible in previous years during the war has not been maintained throughout all sections of the service. This is partly due to the inevitable interval between the departure of staff and the arrival of the new staff and partly to the discontinuation of the service of a temporary Health Visitor.

There is no striking drop in any one section of the work except in the number of “no access” visits, when there were 2,688 less visits paid during 1942 than in the previous year.

The policy of maintaining visits to children between the ages of one and five years has been continued and the decrease in the



work was due to the fact that there was rarely a full staff on duty throughout the year.

In addition to their ordinary work, Health Visitors have attended 11 Vitamin Distributing Centres each week, so that the amount of home visiting undertaken is considered satisfactory under war conditions.

**Attendance of Health Visitors at Clinic sessions :—**

Infant Welfare Centres	..	..	..	..	2,320	(2,302)
Ante-Natal Clinics	..	..	..	..	913	(883)
Post-Natal Clinics	..	..	..	..	60	(62)
Birth Control Clinic	..	..	..	..	105	(105)

These figures show an increase of 46 sessions attended by a Health Visitor.

**ANTE-NATAL CLINICS.**

The number of ante-natal sessions held and the attendances during 1942 were as follow:—

(Corresponding figures, where available, for the previous year are in brackets).

Clinic.	No. of Sessions.	ATTENDANCES.			
		First Visits.	Re-Visits.	Total.	Avg. per Session.
Cort Crescent	53(52)	169(154)	892(699)	1061(853)	20
13, Crescent St.	51(50)	268(238)	993(789)	1261(1027)	25
119, Highcross St.	53(52)	318(313)	1177(1088)	1495(1401)	22
Belgrave Hall—					
Monday	49(86)	122(350)	595(1511)	717(1861)	15 }
Wednesday	53	217	912	1129	21 }
Newby Street	51(50)	303(349)	1244(1224)	1547(1573)	30
St. Christopher's	51(50)	256(228)	1363(902)	1649(1130)	32
Braunstone	49(49)	174(137)	828(616)	1002(753)	20
<b>Totals</b>	<b>410(389)</b>	<b>1857(1769)</b>	<b>8004(6829)</b>	<b>9861(8598)</b>	<b>24</b>
Municipal					
Maternity Home	105(100)	454(399)	1769(1195)	2223(1594)	21
City General					
Hospital	258(260)	880(841)	3974(5365)	4854(6206)	19
Leicester & Leics.					
Maternity Hosp.	152(156)	1224(982)	6493(5001)	7717(5983)	51
Royal Infirmary	104(99)	351(275)	129(197)	480(472)	5
<b>Totals</b>	<b>1129(1004)</b>	<b>4766(4266)</b>	<b>20369(18587)</b>	<b>25135(22853)</b>	<b>22</b>

The following are particulars concerning the source of the new patients who attended the *district* clinics :—

(The corresponding figures for the previous year are in brackets).

Clinic.	Referred by								Totals.
	Health Visitors.	Midwives.	Doctors.	Ex-patients or friends.	City General Hospital.	Other Sources	Other Clinics.	Came of own accord.	
Cort Crescent	69(78)	50(25)	— (1)	22(22)	— (1)	1(1)	2 (—)	25 (26)	169 (154)
13, Crescent St.	43(56)	114(65)	9(15)	26(36)	3 (3)	11(10)	5(17)	57 (36)	268 (238)
119, Highcross St.	49(76)	157(114)	13(8)	26(35)	2 (2)	11(24)	2 (2)	58 (52)	318 (313)
Belgrave Hall	42(31)	163(176)	8 (7)	36(41)	2(10)	12(12)	2 (4)	74 (69)	339 (350)
Newby Street	31(45)	160(194)	13(8)	35(41)	— (5)	16(15)	7 (9)	41 (32)	303 (349)
St. Christopher's	21(19)	238(185)	4 (3)	2(12)	2 (4)	3(1)	1 (1)	15 (3)	286 (228)
Braunstone	9(20)	139(98)	4 (1)	— (7)	— (—)	—(6)	5 (1)	17 (4)	174 (137)
Totals	264(325)	1021(857)	51(43)	147(194)	9(25)	54(69)	24(34)	287(222)	1857(1769)

The attendances at the district clinic show a further increase during the year of 88 new patients in a total of 1,857 such patients.

The clinical work at some sessions has been very heavy and an additional district session was established early in 1943 on the Saffron Lane Estate.

## MIDWIVES.

During the year 1942, 128 midwives notified their intention to practise. Of these, 21 were Municipal Midwives, 15 were midwives in independent practice, and the remaining 92 were practising in maternity hospitals or maternity homes.

## THE MUNICIPAL MIDWIFERY SCHEME.

The organisation of this service, which was summarised in the Annual Report for 1938, remains essentially the same. Twenty-one midwives serve the city, which is divided into eight areas, each served by a team of one to four midwives.



## SUMMARY OF WORK DONE BY MUNICIPAL MIDWIVES IN 1942

Area.	No. of Midwives.	Cases Attended.	VISITS.		
			Post-Natal.	Ante-Natal.	Total
1	4	268	6557	1036	7593
2	4	322	8057	2281	10338
3	2	100	2873	736	3609
4	2	141	4087	643	4730
5	4	240	6522	860	7382
6	2	101	2888	597	3485
7	2	168	4448	520	4968
8	1	57	1174	348	1522
Grand total ..		1397	36606	7021	43627

The figures show an increase of 219 new patients and an increase of 7,173 visits on the figures for the previous year. This increase was anticipated from the increase of bookings in 1941 and early 1942 and from the fact that a scheme of limitation of admissions to the City General Hospital had become necessary.

A few of the midwives worked to capacity in 1942, and with the further increase of bookings which has already taken place it will inevitably mean that midwives will not be able to pay so many visits to cases. Instructions had, therefore, to be given to midwives during the year to use their judgment in omitting certain evening visits when they have a large number of cases to attend.

It is unfortunate that owing to insufficient hospital accommodation some confinements are now taking place in homes which are unsuitable and where midwives would previously have declined to attend. In addition to lowering the standard of the domiciliary service which had been maintained, this also makes conditions of work harder for the midwives themselves.

### OBSTETRIC CONSULTANTS.

During 1942 a consultant was called in to four cases, one natal, and three post-natal emergencies. The nature of the emergency was as follows: Obstructed labour 1, pyrexia of obscure origin 2, tumour complicating puerperium 1.



PUERPERAL PYREXIA

## Notifications and Result of Treatment.

1942.

RESULT OF TREATMENT											
DIED AT					RECOVERED AT						
Home.	Maternity Home or Hospital.	City Isolation Hospital.	City General Hospital.	Royal Infirmary.	Home.	Maternity Home or Hospital.	City Isolation Hospital.	City General Hospital.	Private Hospital.	Royal Infirmary.	
56	27	24	—	7	56	27	24	—	7	56	27
Home.	Maternity Home or Hospital.	City General Hospital.	Private Hospital.	Royal Infirmary.	Home.	Maternity Home or Hospital.	City Isolation Hospital.	City General Hospital.	Private Hospital.	Royal Infirmary.	

## PUERPERAL PYREXIA.

During the year there were 114 notifications of Puerperal Pyrexia, and the table shows the place of confinement, together with the results of treatment at home or in hospital.

## OPHTHALMIA NEONATORUM.

The following details show the incidence and results of treatment of this disease of the new-born during 1942 :—

### Ophthalmia Neonatorum, 1942

Cases notified during year	..	..	..	..	21
Visited by Health Visitors	..	..	..	..	21
Removed to hospitals	..	..	..	..	2
Treated in hospital	..	..	..	..	2

### Result of Treatment :—

Vision unimpaired	..	..	..	..	21
,, impaired	..	..	..	..	—
,, lost	..	..	..	..	—
Still under treatment at end of year..	..	..	..	..	—
Patients died (from other causes)	..	..	..	..	—
Removed from district	..	..	..	..	—
Total	..	..	..	..	21

TABLE 19.

## LIST OF REGISTERED NURSING HOMES

(INCLUDING MATERNITY HOMES.)

ADDRESS.						No. of BEDS.
9 Mere Road	..	..	..	..	..	1
66 Uppingham Road	..	..	..	..	..	4
56 Clarendon Park Road		..	..	..	..	15
348 Aylestone Road	..	..	..	..	..	15
22 Vicarage Lane	..	..	..	..	..	3
306 Aylestone Road	..	..	..	..	..	2
Stoneygate Nursing Home, Stoneygate Road					..	10
Southfields Nursing Home, 84 Regent Road					..	4
39 Scraftoft Lane	..	..	..	..	..	4
"Broadview," Goodwood Road			..	..	..	5
337 Fosse Road North	..	..	..	..	..	14
"Clifton Nursing Home," 58 Fosse Road Central	..					7
Central Nursing Home, 6 University Road	..				..	15
350 Aylestone Road	..	..	..	..	..	8
The Laurels, 185 Uppingham Road	..			..	..	8
Sundial Nursing Home, Aylestone Road				..	..	17
85 Narborough Road	..	..	..	..	..	10
14 Dixon Drive	..	..	..	..	..	2
St. Francis Private Hospital, 362 London Road					..	26
35 Springfield Road	..	..	..	..	..	3



Concerning the ascertainment of Homes which may not be registered, this matter is kept constantly before the Health Visitors and also any births which take place at addresses other than home addresses are carefully scrutinised and followed up.

## MUNICIPAL MATERNITY HOME

The number of confinements at the Home during 1942 was 416 as compared with 353 during the previous year. The corresponding figures for the previous five years were:—

1937	1938	1939	1940	1941
393 (76)	391	391	358	353

(County patients in brackets.)

In spite of limitation of bookings in each month, there have been times during the year when the Home has been overcrowded, and this situation has had to be met occasionally by discharging patients home voluntarily under the care of a district midwife, between the 10th and 12th days.

The ante-natal clinic is held twice weekly in premises in the locality, as facilities at the Home proved inadequate.

### Staff.

Dr. T. W. Allen continues as Medical Officer on call for the Home on a part-time salaried basis.

## TRAINING OF PUPIL MIDWIVES.

The scheme for the training of pupil midwives remains the same as that described for the year 1938, and the number of pupils accepted for training during the year under review was:—

			Part I.	Part II.
Number of Pupils in training at beginning of 1942			30	16
„ „ „ accepted for training during 1942			80	32
„ „ „ who commenced training	...		62	27
„ „ „ who completed training and successfully passed exam. at first attempt	...	...	46	24
„ „ „ who failed to pass exam. but re-sat and passed	...	...	8	1
„ „ „ who completely failed	...	...	9	4
„ „ „ in training at end of 1942	...		40	14

**TABLE 18. MUNICIPAL MATERNITY HOME.**

Return relating to Maternity Homes maintained or subsidised by the Council, as required by the Ministry of Health, for year 1942.

FORM M.C.W. 96a.

1. Name and address of Institution :—	
Municipal Maternity Home, Westcotes Drive, Leicester.	
2. Number of beds in the Institution (exclusive of isolation and labour beds) at 31st December, 1942 .. ..	25
2a. Number of beds, if any, included under item 2 which have been allocated to, and reserved for, expectant mothers in need of Hospital treatment .. ..	3
3. Number of maternity cases admitted during the year—	
Admissions	465
Patients	416
3a. Number of women treated during the year in the beds shown against item 2a. (These women should be included also against item 3) .. ..	34
3b. Average duration of treatment of Expectant Mothers in beds shown against item 2a .. ..	4 days
4. Average duration of stay of cases included against item 3..	13.38 days
5. Number of cases delivered by :—	
(a) Midwives .. ..	364 + (2 B.B.As.)
(b) Doctors .. ..	50
6. Number of cases in which medical assistance was sought by a midwife in emergency .. ..	168
7. Number of cases admitted after delivery .. ..	2
8. Number of cases notified as—	
(a) Puerperal Fever .. ..	—
(b) Puerperal Pyrexia .. ..	10
9. Number of cases of pemphigus neonatorum .. ..	—
10. Number of infants not entirely breast-fed while in the Institution .. ..	12
11. (a) Number of cases notified as ophthalmia neonatorum..	Nil
(b) Result of Treatment in each case	—
12. (a) Number of maternal deaths .. ..	Nil
(b) Cause of death in each case. .. ..	—
13. (a) Number of stillbirths .. ..	7
(b) Cause of death in each case and results of post-mortem examination (if obtainable)—	
Prematurity—toxaemia .. ..	2
Prematurity—breech presentation .. ..	1
Prematurity—ante partum haemorrhage .. ..	1
Prematurity .. ..	1
Anencephalic .. ..	1
Disproportion—difficult forceps .. ..	1
14. (a) Number of infant deaths within 10 days of birth ..	Nil
(b) Cause of death in each case and results of post-mortem (if obtainable) .. ..	—



## POST-NATAL CLINIC.

The only Post-Natal Clinic established is the one which is limited to women who have been confined in the Municipal Maternity Home. It was opened in May, 1938, and the attendances for the year 1942 were as follow :—

No. of new patients invited	..	..	..	..	388
No. of new patients attending (i.e. first visits)	..				241
No. of patients who paid second visit	..	..	..		124
No. of patients who paid third visit	..	..	..		6
Total attendances (first and subsequent visits)	..				371

Of the new patients examined at first visit :—

Found to be normal	..	..	..	..	170
Found to be abnormal	..	..	..	..	71

Treated at the Clinic	..	..	..	2
Treatment advised at Clinic	..	..		11
Referred to own doctor	..	..	..	17
No treatment ordered	..	..	..	41
				—
				71

Still attending on 31st December, 1942	..	..	72
--	----	----	----

Of the 17 patients referred to their own doctor, the following information is available :—

Patients treated by own doctor	..	..	..	3
Patients who attended own doctor but treatment not provided	..	..	..	2
Patients who attended own doctor but treatment deferred	..	..	..	2
Patients who left City before being treated	..	..		—
Patients awaiting admission to hospital	..	..		1
Patients for whom report is not yet available	..			7
Patients who failed to attend own doctor	..	..		2

The above statistics are for patients invited for 1942 only. In addition 37 patients attended—carried over from 1941.



## BIRTH CONTROL CLINIC.

The following figures refer to the year 1942.

	<i>City.</i>	<i>County.</i>	<i>Total.</i>
Number of patients who sought advice ..	97	42	139
„ „ were accepted for advice .. ..	89	40	129
„ „ were refused advice	8	2	10

Concerning the 129 women accepted for advice, the following are the medical reasons for which the advice was given:—

<b>Husband:</b>	<i>City.</i>	<i>County.</i>	<i>Total.</i>
Active Tuberculosis .. ..	2	—	2
Other diseases .. ..	—	—	—

### Children :

Tuberculosis .. ..	—	—	—
Other diseases .. ..	3	—	3

### Patient:

Nervous debility .. ..	4	2	6
General debility.. ..	31	17	48
Anaemia .. ..	8	5	13
Pulmonary Tuberculosis .. ..	5	—	5
Heart disease .. ..	3	2	5
Kidney disease .. ..	1	—	1
Albuminuria of pregnancy .. ..	2	—	2
Toxaemia of pregnancy .. ..	2	4	6
Obstetric complications .. ..	5	3	8
Gynaecological conditions .. ..	7	2	9
Various other conditions .. ..	16	5	21

## Cases in which advice was refused.

Advice was refused to 10 women (8 City and 2 County). Three women were found to be pregnant, in four women there were no medical grounds, one woman was advised re sterility, one was advised re a further pregnancy and one woman was not advised because she was a case of co-habitation.

## SCHOOLS FOR MOTHERS AND INFANT WELFARE CENTRES.

The year's work has continued on the appointment basis instituted at the outbreak of war and in general has worked well.

The medical staffing of the clinics has been undertaken by part-time Medical Practitioners when a full-time Medical Officer has been called up for military service.

The following statistical details for the year 1942 are some indication of the work which is undertaken at the Centres:—

(Corresponding figures for the previous year in brackets).

Number of Infant Welfare Centres	22	(22)	
„ „ Medical Weekly Sessions	24	(24)	
Number of Sessions held ..	1,239	(1,183)	
Total attendances of Mothers	47,206	(44,237)	
Total attendances of Children—			
Under one year old ..	36,190	} 48,866	(31,701)
Over one year old ..	12,676		(14,251)
			(45,952)
First visits of Children—			
Under one year old ..	3,347	} 3,875	(3,080)
Over one year old ..	528		(866)
			(3,946)
Number of Children attending—			
Under one year old ..	2,828	} 7,066	(2,779)
Over one year old ..	4,238		(4,379)
			(7,158)
Number of Sessions at which a doctor was present ..	1,177		(1,166)
Number of children seen by a doctor .. .. .	21,358		(21,148)

The figures show:—

(a) That the number of Infant Welfare Centres and medical weekly sessions has been maintained.

(b) An increase of 56 in the number of sessions held. This is accounted for partly because clinics were kept open on some days which had previously been holidays and because the period under review includes 53 weekly sessions for some clinics.

(c) The total attendances of mothers shows an increase over the previous year, which was a record.

(d) There was a decrease of 74 in the total number of children of all ages attending for the first time, but this is offset by the fact that there was an increase of 265 children under one year making their first attendance. The decrease was in the number of children brought to the clinic for the first time after reaching the age of one year, which is, in fact, a satisfactory state of affairs.

The total attendances of children show an increase of 2,914. This is made up by an increase of 4,489 in the number of attendances of children under one year and a decrease of 1,575 in attendances of children over one year. The younger children are, therefore, making satisfactory attendances. Some of the older children are accounted for by the opening of additional Day Nurseries and Nursery Classes.

(e) The absence of a doctor from 62 sessions is accounted for largely by the difficulty of obtaining part-time locums, especially during holiday periods.

(f) The average number of children seen by a doctor at each session was 18, similar to that recorded for 1941.

### INFANTS' MILK DEPOT.

The work of the Infants' Milk Depot continues unchanged at 13, Crescent Street. This Depot is also a distributing centre in connection with Vitamin products.

### TREATMENT AT THE SCHOOL CLINICS.

No change except as shown hereunder.

#### Dental Clinic.

Details of the work done during the year are set out below:—

(The corresponding totals for the previous year are shown in brackets)

		<i>Children</i>	<i>Adults.</i>	<i>Total.</i>
		<i>under 5 years.</i>		
Number of cases treated	..	79	299	378 (405)
Number of attendances..	..	92	1129	2121 (1303)
Extractions—Permanent teeth		—	2102	2102 (1966)
Temporary teeth..		158	—	158 (274)
Anaesthetics—Local	.. ..	70	411	481 (547)
Gas	.. ..	—	24	24 (16)
Fillings—Permanent teeth	..	—	46	46 (52)
Temporary teeth	..	9	—	9 (15)
Scalings	.. ..	—	33	33 (28)
Dentures	.. ..	—	192	192 (205)
Prosthetic dressings, etc.	..	—	406	406 (451)
Repairs, etc.	.. ..	—	10	10 (6)
Consultations	.. ..	—	100	100 (114)
Number of sessions held	..			137 (147)
Number of cases under treatment on 31.12.42	.. ..	—	—	— (109)



### Artificial Sunlight.

Number of children treated :—	1942	1941
New admissions .. .. .	130	119
Infants who had already received treatment during 1941 .. .. .		19
Total number of infants who had finished their treatment during the year and were discharged .. .. .		62

The table below gives the particulars :—

			<i>Good Results</i>		<i>Fair or Unchanged</i>		
			<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Rickets	..	..	22	14	2	—	38
Debility	..	..	5	3	—	—	8
Anaemia	..	..	4	—	—	—	4
Various	..	..	6	5	1	—	12
			—	—	—	—	—
Totals	..	..	37	22	3	—	62

No report could be made on 13 infants who made less than 12 attendances.

**Orthopaedic Clinic.** No change.

**Other School Clinics.** There were 147 children under 5 years of age admitted to the Ear, Nose and Throat Clinic, 53 to the Eyes Clinic and 190 to the Skins and Minor Ailments Clinic.

### ASSISTANCE IN NECESSITOUS CASES.

A special sub-committee, of which Mrs. Councillor Simpson is Chairman, meets weekly to consider applications for help in necessitous cases of mothers or children under five years of age.

The amount and variety of assistance granted may be seen from the following figures :—

(The corresponding figures for the previous year are shown in brackets).

Number of cases granted dried milk free ..	79	(195)
Number of cases admitted to the Day Nursery free or at reduced rates .. .. .	7	(15)
Number of cases admitted to the Maternity Home at reduced rate .. .. .	1	(2)
Number of cases in which doctors' fees were wholly or partly remitted .. .. .	—	(5)
Number of cases in which part or total fees for midwives were allowed .. .. .	3	(6)

### Assistance in Necessitous Cases—*continued*.

Number of cases in which dental fees were remitted	2	(5)
Number of cases in which Home Help fee was remitted .. .. .	1	(—)
Number of cases in which no action was taken	3	(7)

Liquid milk is no longer granted by this Sub-Committee since the introduction of the National Milk Scheme during 1940.

### DAY NURSERIES.

The War-Time Day Nursery Scheme, as outlined in the previous Report, has been put into operation during 1942.

Additional Day Nurseries were opened at:—

352, Humberstone Road;

15, Fosse Road Central;

434, Narborough Road;

A hutted Day Nursery on The Fairway, Saffron Lane, and 146, New Walk.

Approval was received for the establishment of a Day Nursery at 1, College Street and Belgrave House, Thurcaston Road.

The hutted Nursery at Bradgate Street and the Nursery, 1, College Street, were opened on 11th January, 1943.

The fact that all the Nurseries had waiting lists within three months of being opened, indicates their need and popularity. The waiting lists at some Nurseries are so heavy that mothers have to be warned that the prospects of a vacancy are poor.

In collaboration with the Education Authority and the Ministry of Labour, extension of hours at existing Nursery Classes may be provided in those areas where the Day Nursery waiting lists are particularly heavy.

The Scheme provided for the Matron of the peace-time Day Nursery at St. Martin's supervising the work in general at the war-time Nurseries. The war-time Nurseries are staffed by a State Registered Sister in Charge, plus trained Staff Nurses and Probationers as required. Members of Child Care Reserve, a substitute for the scarcity of Nursery-trained Teachers, have been added to the staff when obtainable. Two courses of training for Child Care Reserve personnel have been held in Leicester since the outbreak of war up to the end of 1942, but have not produced a supply equal to the demand for staff in our war-time Nurseries.

<b>Attendances.</b>	<i>Whole Day.</i>	<i>Half Day.</i>	<i>Daily Average.</i>
St. Martin's ... ..	12,574	1,837	46.9
Glen Street (opened 1.9.41) ...	10,846	1,639	40.7
Humberstone Road (opened 25.3.42)	5,126	671	25.2
Fosse Road (opened 30.3.42) ...	4,678	640	23.1
Narborough Road (opened 26.5.42)	3,367	384	20.7
Fairway (opened 16.9.42) ... ..	1,088	135	15.9
New Walk (opened 28.10.42) ...	812	104	19.1

### Teaching of Mothercraft.

It is regretted that this branch of the work has been in abeyance since the outbreak of the war owing to the decision of the Education Committee that the air raid precautions at the Nursery were not adequate for school girls.

### INFANT LIFE PROTECTION.

#### Staff.

The work is now carried out by one Health Visitor only, instead of being divided among the whole staff of District Health Visitors.

#### Statistical Table.

Visits .. .. .	1042
Applications for registration ..	91
Applications refused .. ..	3
Legal proceedings .. .. .	—
Number on register at 31st Dec., 1942 .. .. .	80 persons (86 children)

The cases refused registration were followed up and alternative provision found for the children in question without legal proceedings being taken.

### MATERNAL MORTALITY.

Number of deaths during the year :—

*From puerperal sepsis .. .. .	—
*From other accidents and diseases of pregnancy and parturition .. .. .	—
<b>Total .. .. .</b>	<b>—</b>

\* These are local figures.



				1942	1941
*Rate per 1,000 live and stillbirths..	..	..	..	1.80	1.03
*Puerperal sepsis rate	..	..	..	0.45	0.26

Figures for England and Wales :—

Maternal mortality rate	..	..	..	2.01
Puerperal sepsis rate	..	..	..	0.42

The local figures compare favourably with those of England and Wales, especially when it is noted that the total rate for England and Wales excludes abortion, whereas the local figures include two of abortion in the total of maternal deaths.

## INFANT MORTALITY.

Number of deaths in infants under 1 year	..	..	..	---
Corrected number of births	..	..	..	---
Infant death-rate	..	..	..	50.6

Infant death-rate for	England & Wales	Great Towns
	49	59

and therefore the local figures compare favourably with those for England and Wales and Great Towns.

The Infant Mortality rate is still kept up chiefly by deaths occurring under 1 week, there being 35% of deaths in the total in this category.

The classification with the largest number of deaths is still prematurity, which accounted for 26% of the total. Diarrhoea accounted for 21% of the total deaths, which is an unusually large figure, but there was nothing in the nature of an epidemic of infantile diarrhoea in the City during 1942.

\*These are local figures.

July, 1943.

E. B. BERENICE HUMPHREYS.

# Report of the City Analyst

## For the Year 1942.

By

F. C. BULLOCK, B.Sc., F.I.C.

Public Analyst and Official Agricultural Analyst.

### FOREWORD BY THE MEDICAL OFFICER OF HEALTH.

The Public Analyst in his report for 1942 deals with a great variety of foodstuffs and drugs which he has examined. He is able to report that the wave of "Food Substitutes" of very doubtful quality which swept over this country during the first year of the war, has to some extent subsided, though there is still room for improvement.

During the year it became law that the analysis of the ingredients of all proprietary medicines should be clearly stated on the outside cover—a step in the right direction, certainly—but, as he points out, largely vitiated by the fact that the public does not understand the meaning of the analysis and thinks that a long list of different substances must necessarily indicate great potency, irrespective of the percentage of the various articles present, which is often of a minimum.

It would be very interesting if the cost of manufacture also had to be placed on the label! The disclosures thus made would amaze the public and perhaps make them realise how worthless the article they are buying so often is.

# Report of the City Analyst

For the Year 1942.

By F. C. BULLOCK, B.Sc., F.I.C.

Public Analyst and Official Agricultural Analyst.

## Staff.

Mrs. Smith resigned from the laboratory staff during the year and Mr. H. M. Bee, of the Wyggeston Boys' School, was appointed in her place as temporary laboratory assistant.

Mr. K. K. Lockhandvala was appointed in July, 1942, and resigned to take up another appointment in December, 1942. His place was not filled during the year.

Mr. P. G. Wright, who is on active service with the Royal Navy, has received a commission and is at present in the U.S.A.

## Legal.

No more than in previous years did the Minister of Health, in 1942, use his powers under the 1938 Act to impose any food standards; but the Minister of Food instituted standards for the minimum amount of fish in fish-cakes, the maximum amount of added water in fruit pulp and the maximum amount of fat and sugar in cake, and further facilitated the taking of samples by The Sampling of Food Order (S.R. & O. 1942 No. 531).

Among many other foods controlled in various ways, ice-cream, including water ices, was prohibited from manufacture and sale as from the 1st October, 1942. Saccharin and sweetening tablets were controlled as regards composition and prices from the 1st December, 1942.

The provision of the Pharmacy and Medicines Act, 1941, requiring the disclosure of the composition of medicines, came into force on the 1st July, 1942. This innovation will be of value to Analysts and Magistrates, but only to the general public in as far as they study intelligently and critically the labels of medicinal



preparations they buy. The value of the Act would be increased if the disclosure of composition had to be made in Press advertisements as well as on labels, since the decision to buy is usually made after reading advertisements, and few people read labels closely, in any case.

### **Food and Drug Samples.**

841 samples were received during the year under the Food and Drugs Act, including 21 submitted by the public. 71 samples were reported against for offences under various sections of the Act (8.4 per cent.). The total number of samples submitted was smaller than in previous years, partly because from the 1st July milk samples taken for bacteriological examination were not also submitted as informal samples for chemical analysis. They were, in actual fact, all analysed chemically and in some cases were below standard.

In view of the present large-scale bulking of milk supplies prior to pasteurisation by big distributors, the presence of one or two per cent. of water in samples from such supplies is of significance. In one instance recently, farmers adding considerable amounts of water to their milk were traced as a result of suspicion revealed by the presence of two per cent. of water in bulked milk.

### **Milk.**

17 samples out of 545 submitted by Inspectors for chemical analysis were condemned either for added water or for fat deficiency (Table C). Proceedings were instituted in the case of No. 479, containing 4.6 per cent. of added water, and No. 491, having a fat deficiency of 10 per cent. In both cases, fines of £5 were imposed.

Six samples, all of bottled milk, were submitted privately under Section 69 of the Food and Drugs Act, and complaints were considered justified in five cases. In two samples, adherent films of dark coloured material inside the bottles were found to consist of mould growths—a species of *Oidium*.

Sample No. S.152 was submitted as a bottle of milk containing “dirt with legs on.” 25 specimens of Puparia of *Drosophila Busckii* were found present in the milk.

S.157 was a bottle of T.T. certified milk, containing a “horrible dark-coloured object, probably alive.” The foreign object in this

case was a perfectly harmless and quite good quality plated tea-spoon. “. . . How easily is a bush supposed a bear.” How the spoon had failed to be removed by the bottle-washing process was never satisfactorily explained.

While there is no excuse for the dairyman supplying his customers with milk in dirty bottles, the ultimate responsibility is often that of the previous customer, who failed to rinse the bottle as soon as it was emptied. The Milk (Use of Bottles) Order (S.R. & O. No. 298 1943) could be enforced in this connection when necessary.

Sample No. 636 was a formal sample of “Pasteurised Milk.” The Phosphatase “B” test gave 10.4 Lovibond blue units, whereas efficiently pasteurised milk should not give a reading exceeding 2.3 L.B.U. The vendor was fined £5.

### **Pasteurised Milk (Phosphatase Test.)**

The department continues to examine daily samples from every pasteurising plant in the City to ascertain the efficiency of pasteurisation by the above test. 96.8 per cent. of the samples examined in 1942 were satisfactory (less than 2.3 blue units) (Table M). Figures for previous years were as follow:—

Year		Per cent. of samples satisfactory.				
1937	...	...	...	...	...	37.1
1938	...	...	...	...	...	89.0
1939	...	...	...	...	...	96.4
1940	...	...	...	...	...	96.1
1941	...	...	...	...	...	94.7

Formal samples of pasteurised milk are now recommended for prosecution if the Phosphatase Test shows serious under-pasteurisation.

### **Other Food Samples.**

Miscellaneous samples other than milk which were reported against are listed in Table D. The Food Substitutes (Control) Order, 1941 (S.R. & O. No. 1606 1941) was only partially successful in stopping the flood of “catchpenny” lines referred to in previous reports. Over-generous periods of grace were allowed by the Ministry of Food for stocks of many worthless lines to be worked off on to the public, and the Order left a certain amount of



ambiguity as to the meaning of "Food Substitutes." Where loopholes existed it was not to be expected from the type of business adventurer whose standard of conduct made the Order necessary in the first place that the spirit of the Order would be respected if there was a sporting chance of evading its provisions.

Thirdly, Public Analysts are not advised what composition to expect in substitutes approved and licensed by the Ministry of Food, although, apart from this limitation, the Ministry of Food has been otherwise very helpful when consulted concerning these products. Nevertheless, in view of the limitation some Analysts consider there is no point in sampling food substitutes except to scrutinise the label and test for injurious ingredients. The present position, therefore (June, 1943), is that there are still many low value lines on the market that all sensible purchasers should boycott; in particular, many unsatisfactory soft drinks are being offered by retailers in which obviously more thought has gone into devising evasive names and wording for labels than in compounding worth-while products to put into the bottles. The new Soft Drinks (Control) Order, 1943 (S.R. & O. 838) is designed to clear up this particular branch of the food market after the 31st July, 1943.

Only a few items from Table D can be referred to in detail.

#### **Coffee Extract No. 1607.**

This article had an impressive label on the bottle, but the contents were 96.5 per cent. water. There was only sufficient coffee extractive in one bottle (price 1/8) to make one average cup of coffee.

#### **Rose Hip Syrup No. 359.**

This brand contained only 26.8 milligrammes Vitamin C per 100 mls., which is less than one-seventh of the Ministry of Health's standard prevailing at the time. The label gave the impression that the syrup contained at least 123 per cent., of something or other, but any child who trusted entirely to this supply following the recommended dosage would not have received an adequate amount of ascorbic acid.

#### **Cheese Powder No. 361.**

This was apparently cheese made from partially skimmed cows' milk dehydrated and powdered. The price charged was equivalent to 10/- per pound. Three ounces of the powder completely occupied a 6oz. jar.



In view of the high price charged (1/10½ for three ounces) it was reported on the certificate that "the powder was mixed with air, fraudulently to increase its bulk" contrary to the Food and Drugs Act, 1938, Section 4. No formal sample was received but the sale of the supply was stopped.

*Malt Vinegar* No. 465 was swarming with vinegar eels; the number present was about 2,000 per ml. The presence of the eels was good presumptive evidence that the sample was genuine malt vinegar, as the eels do not develop in artificial vinegar, but one can have too much of a good thing, and the supply was condemned.

*Coffee* No. 472 was a brand prepacked in cardboard cartons and was labelled "Freshly roasted . . ." As the brew made from it tasted more of cardboard than of coffee, the "freshly roasted" claim was queried as misleading under Section 6. It transpired in subsequent correspondence that the packers had issued this batch so long previously (over two years) that they did not realise that any could still be in circulation. The supply was withdrawn.

*Pork Sausage* No. 609 only contained 27.5 per cent. meat. In view of the broad interpretation which has to be given to the term "meat" in relation to sausage, it is considered that the bottom limit of 30 per cent. meat now required in sausages should be taken as an absolute minimum, and proceedings were instituted. The vendor was fined £5.

*Brandy mint* No. 1106. This liquid was no more than tap water with sufficient peppermint oil to give a smell when the cork was removed from the bottle. It was sold by a hawker at 2/9 per bottle. Unfortunately, no formal sample was obtainable.

## **Drugs.**

Out of 69 samples taken, 16 were given adverse reports. Only two need be mentioned beyond the statement of the deficiency set out in Table D.

### **Fruit Preserving Tablets, No. 1366.**

This sample was not labelled strictly in accordance with the Public Health Preservative Regulations; and further contained 54.5 per cent. SO<sub>2</sub>, whereas the declared amount was 44 per cent. This excess would not be serious to home users in bottling fruit

for their own consumption, but could prove very misleading to people using the preservative in articles that had later to be sold and comply with the maximum amounts of preservative permitted in the Regulations.

### **Glycerin Substitute.**

About the time the Food Substitute Order was becoming operative, a number of "Glycerin Substitutes" appeared on the market, glycerin being considered a drug presumably and substitutes for it not coming within the scope of the control order. Bearing in mind the unique combination of properties of glycerin, it is obvious that no single substance or solution or combination of substances exists that could be devised which would replace glycerin on all occasions, any more than one could find a substitute for water.

The manufacturers of these "substitutes," however, admitted no limitation and even printed the word "substitute" much smaller than the word "glycerin."

The preparations offered mostly took the form of 2 per cent. suspensions in water of cellulose derivatives, alkali being used in some cases to aid solution. They only resembled glycerin in being colourless viscous liquids but had no nutritive, sweetening, preservative, penetrating or hygroscopic properties. They were quite ineffective to soften the skin, to keep pastilles or other gelatin products plastic, or as anti-freezes in motor-car radiators. They would not have prevented the staling of cakes nor the drying out of toilet preparations, and certainly would not have nitrated to form explosives.

### **Pharmacy and Medicines Act, 1941.**

Six samples were submitted under this Act. In the cases of four of them, all compound drugs, no quantitative particulars of the active ingredients were given on the label. They were reported against as infringing the Pharmacy and Medicines Act, 1941, Section 11 (1) (i).

### **Fertilisers and Feeding Stuffs.**

Eighteen samples were received from Inspectors; two were unaccompanied by statutory statements of composition (Table H). The vendors were cautioned. Excesses in composition in some samples were reported as not prejudicial to the purchasers.



One sample of Muriate of Potash, submitted privately (S.149) proved on analysis to be superphosphate of lime. It was a genuine mistake, apparently the bags on a lorry becoming mixed.

There is a big demand at the present time by small-scale users of general fertilisers for conveniently prepacked supplies; and manufacturers are not slow to meet the demand. It was noted in some of the samples received that there is a growing tendency to make somewhat meaningless claims on the packets. "Ingredients blended in correct proportions," for instance. There is obviously no absolute correctness, as the relative amounts of nitrogen, phosphate and potash required depend on the soil to which the fertiliser is applied and the crop being grown, information which the manufacturer cannot possibly have.

Claims are made in some cases, usually of liquid preparations, that the sample will make so many gallons of fertiliser. This figure is very empirical and simply bears inverse relation to the strength of the solution. As purchasing fertilisers in small quantities is dear in any case, it would be better to put full value into the packet or bottle, confine the label to a plain statement of the composition of the contents and cut out the trade puffs.

### **Miscellaneous.**

City Supply drinking water as delivered to consumers was uniformly satisfactory throughout the year (Table N).

Swimming Bath waters (Table G) were usually good and where conditions were not quite ideal, the necessary adjustments were made to filtration plant immediately.

Artificial Creams (Table F) maintained the improvement noted in 1941.

I wish to record my appreciation of the support of the Staff throughout the year.

F. C. BULLOCK,  
Public Analyst.



**TABLE A.**

**Summary of Samples Analysed during 1942.**

**Food and Drugs Act, 1938 :**

Samples submitted by Sanitary Inspectors	783
"          "          " Public .. ..	21
Shellfish (Bacteriological Samples) ..	11
Artificial Cream (Bacteriological Samples)	26
	<hr/>
Total .. .. .	841

**Fertilisers and Feeding Stuffs Act, 1926 :**

Informal samples submitted by Sanitary Inspectors.. .. .	18
Formal samples submitted by Sanitary Inspectors.. .. .	—
	<hr/>
Total .. .. .	18

<b>Rag Flock Act, 1911</b>	.. .. .	1
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<b>Milk (Special Designations) Order, 1936</b>		621
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Reference Samples .. .. .	20
Atmospheric Pollution Samples .. ..	345
Civil Defence Samples .. .. .	16

<b>Pharmacy and Medicines Act, 1941</b>	..	6
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**Miscellaneous Samples for various Committees :**

Health Committee .. .. .	1,268
Water Committee .. .. .	187
Other Committees .. .. .	113

Total .. .. .	<hr/>	1,568
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Grand Total .. .. .	<hr/>	3,437
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**TABLE B**  
**FOODS AND DRUGS ANALYSED DURING 1942**  
(Sampled by Inspectors under Food and Drugs Act.)

**Foods Analysed.**

Sample.	No.	Sample.	No.
Milk ... ..	545	Lard ... ..	9
Baker's Oil ... ..	1	Lemon Flavouring ... ..	3
Beer ... ..	1	Lemon Substitute ... ..	9
Bemax ... ..	1	Lemonade ... ..	1
Black Currant Flavour ... ..	1	Margarine ... ..	13
Black Currant Syrup ... ..	1	Meat Roll ... ..	1
Brandy Mint ... ..	1	Meat Spread ... ..	2
Browning Essence ... ..	1	Milk Substitute ... ..	1
Bread ... ..	5	Mustard ... ..	5
Butter ... ..	6	Nutmeg (Ground) ... ..	2
Cakes ... ..	7	Oatmeal ... ..	1
Cheese ... ..	1	Onion Flavour ... ..	1
Cheese Powder ... ..	1	Onion Substitute ... ..	2
Chopped Pork ... ..	1	Orange Cordial ... ..	1
Coffee ... ..	8	Peanut Butter ... ..	1
Coffee Extract ... ..	1	Pepper ... ..	4
Cooking Fat ... ..	1	Rose Hip Syrup ... ..	2
Dried Eggs ... ..	1	Savoury Sandwich Slice ... ..	1
Dried Figs ... ..	1	Sugar ... ..	8
Egg Substitute Powder ... ..	1	Sugar Substitute ... ..	1
Fish Roll ... ..	1	Sausages ... ..	11
Flour ... ..	10	Tea ... ..	3
Gin ... ..	1	Tinned Beef with Vegetables	1
Glusac ... ..	1	Tinned Soup ... ..	1
Glycerin Substitutes ... ..	8	Vinegar ... ..	4
Gravy ... ..	1	Wheaten Food ... ..	1
Gravy Colouring ... ..	1	Whisky ... ..	5
Ground Ginger ... ..	1	Yeast ... ..	1
Ice Cream ... ..	2		
Jam ... ..	17	Total ... ..	725
Jelly Crystals ... ..	1		

**Drugs Analysed during 1942.**

Sample.	No.	Sample.	No.
Aspirin Tablets ... ..	1	Phensic Tablets ... ..	1
Bismuth Dyspepsia Tablets ... ..	1	Quinine, Ammoniated	
Bismuth Tablets ... ..	1	Tincture of ... ..	6
Camphorated Oil ... ..	8	Raspberry Vinegar ... ..	1
Castor Oil ... ..	8	Saccharin Tablets ... ..	1
Cod Liver Oil ... ..	7	Salad Oil ... ..	1
Cod Liver Oil with Malt ... ..	2	Sweet Spirit of Nitre ... ..	1
Epsom Salts ... ..	1	Syrup of Figs ... ..	2
Fruit Preserving Tablets ... ..	1	Vita Glucose Tablets ... ..	1
Glauber's Salt ... ..	4		
Honey, Malt and Halibut		Total Drugs ... ..	58
Liver Oil ... ..	1	Total Foods ... ..	725
Iodine, Tincture of ... ..	6		
Magnesia ... ..	2	Total Food and Drugs ... ..	783
Magnesia, Milk of, Tablets ... ..	1		

TABLE C. Milk Samples reported "Not Genuine."

Sample No.	Article	Formal Informal or Private	Remarks
1606	Milk (Pasteurised)	Informal	4% added water
356	" ....	Formal	9% " "
S147	" ....	Private	Contaminated with mould spores
711	" (Accredited)	Informal	8% deficient in fat
729	" (T.T. Certi- fied) ....	"	8% " "
S152	" (in bottle) ....	Private	Contained insect larvæ
789	" (Pasteurised)	Informal	30% deficient in fat
790	" "	"	36% " "
797	" (Accredited)	"	25% " "
799	" "	"	6% " "
829	" (T.T. Certi- fied) ....	"	10% " "
837	" (Pasteurised)	"	42% " "
479	" ....	Formal	4.6% added water
491	" ....	"	10% deficient in fat
1362	" ....	"	2% deficient in solids not fat
1365	" ....	"	3% added water
S156	" ....	Private	0.22% lactic acid present
S157	" (T.T. Certi- fied) ....	"	Spoon in the bottle
S159	" ....	"	Moulds present
1006	" (Pasteurised)	Formal	Insufficiently Pasteurised
1024	" "	"	
636	" "	"	

TABLE D. Samples other than Milk reported "Not Genuine."

Sample No.	Article	Formal Informal or Private	Remarks
195	Iodine-Tincture of	Informal	7.6% deficient in Iodine
199	Quinine-Ammono- niated Tincture of ....	"	22% " " ammonia
497	Flour ....	"	Grubs and moth eggs present
498	" ....	"	Mites " " "
499	" ....	"	" " " "
414	Lemon Substitute	"	Mis-labelled
415	" "	"	
416	" "	"	
439	" "	"	
440	" "	"	
1604	" "	"	



TABLE D.—continued.

Sample No.	Article	Formal Informal or Private	Remarks
1605	Rose Hip Syrup....	Informal	Deficient in Vitamin C
359	„ „ „ ....	Formal	„ „
1607	Coffee Extract ....	„	Deficient in Coffee
361	Cheese Powder ....	Informal	Excessive Price
448	Camphorated Oil	„	Improper Label
S146	Lemon Substitute	Private	Deficient in Vitamin C
241	„ „	Informal	„ „
242	„ „	„	Mis-labelled
243	Onion Substitute	„	„
244	Vitamin Food ....	„	Deficient in protein and fat
S148	Pork Luncheon Meat	Private	Meat condemned
1638	Lemon Substitute	Informal	} Mis-labelled
1639	Onion Substitute	„	
368	Glycerin Substi- tute	„	Gum substitute or thicken- ing agent, not glycerin substitute
S151	Tinned Fish Roll	Private	19% deficient in fish
373	„ „ „	Formal	24% „ „
460	} Glycerin Substitutes {	Informal	} Gum substitutes or thicken- ing agents, not glycerin substitutes
461		„	
462		„	
463		„	
1664	Sugar ....	Informal	Contained 16% Sodium Bicarbonate
S153	Bread ....	Private	Contained moulds
465	Vinegar ....	Informal	„ vinegar eels
472	Coffee ....	„	} Mis-labelled Tasted of cardboard
1323	Glycerin Substi- tutes	„	
1324	„ „	„	} Thickening agents not Glycerin Substitutes
S154	Sweetening Powder	Private	
396	Meat Roll ....	Informal	3.7% Saccharin Unfit for human consumption
1343	F.F.S. Strawberry Jam	„	2½% deficient in soluble solids
1421	Aspirin Tablets ....	„	Excess Salicylic Acid
1419	Glauber's Salt ....	„	Sample effloresced
1366	Fruit Preserving Tablets	Formal	Excess Sulphur Dioxide
1101	Margarine ....	Informal	0.6% excess water ; moulds preaent
1103	Beef Sausage ....	„	7% deficient in meat
604	„ „ ....	Formal	1.4% „ „
609	Pork „ ....	„	8% „ „
1106	Brandy Mint ....	Informal	99.6% water ; 0.4% oil
629	Magnesia ....	„	Contained magnesium carbonate

TABLE E.  
Results of Bacteriological Examinations of Milk, 1942

Grade.	Total No. examined.	Passed as satis- factory.	No. which failed Me. Blue Test.	Total count too high.	B. Coli too numerous.	% satisfactory		
						1940	1941	1942
Tuberculin Tested (Certified) ..	78	71	2	—	6	80.9	85.4	91.0
Accredited .. ..	159	104	39	—	39	74.2	70.5	65.4
T.T. (Pasteurised) .. ..	36	36	—	—	—	86.7	66.7	100
Pasteurised .. ..	279	234	—	45	—	92.2	83.8	83.9
School Milk (Pasteurised) ..	68	57	—	11	—	86.3	92.7	83.9
Total .. ..	620	502	41	56	45	85.4	81.5	81.0

**TABLE F.**  
**Results of the Bacteriological Examinations of Artificial Cream, 1942.**

Total	Satisfactory	Unsatisfactory.	
		B. Coli	Count
27	25	1	2
		2	

**TABLE G.     Swimming Bath Waters Examined during 1942.**

Bath	No. examined	No. of satisfactory bacteriological quality	Unsatisfactory		% passed as bacteriologically satisfactory
			Count too high	B. Coli too numerous	
Vestry Street .. .. .	16	14	2	1	87·5
Aylestone .. .. .	9	7	2	—	77·8
Total (Corporation Baths) .. ..	25	21	4	1	84·1
Kenwood .. .. .	8	8	—	—	100
Humberstone Lido .. .. .	5	5	—	—	100
Total (all Baths) .. .. .	38	34	4	1	89·5

**TABLE H.     Fertilisers and Feeding Stuffs Analysed under the Fertilisers and Feeding Stuffs Act during 1942.**

Sample	Number	Number Unsatisfactory.		
		Composi- tion Incorrect	Statutory Declara- tion Defective	Total
Fertilisers.				
Balancer Meal .. ..	2	—	1	1
Bone Meal .. ..	4	—	1	1
Bran .. ..	2	—	—	—
Chick Meal .. ..	1	—	—	—
Compound Fertilisers ..	3	—	—	—
Layers Mash .. ..	1	—	—	—
Liquid Fertilisers ..	2	—	—	—
Nitro-Chalk .. ..	1	—	—	—
Sulphate of Ammonia ..	1	—	—	—
Superphosphate of Lime	1	—	—	—
Total .. ..	18	—	2	2



**TABLE I.**  
**Samples examined for various Corporation Departments.**

<b>Health Department.</b>				Forward ... 1634			
Sulphur Cylinders ...	...	...	34	<b>City Mental Hospital</b>			
SO <sub>2</sub> Observations ...	...	...	300	Milk (Bacteriological) ...	...	1	
Rain Waters ...	...	...	12				1
			— 346	<b>Chief Constable.</b>			
Waters—Chemical				Charms ...	...	2	
Cellar Water ...	...	...	1	Milk (Chemical) ...	...	1	
Tank Water ...	...	...	1				3
Tank Water Deposit ...	...	...	1	<b>Coroner.</b>			
			— 3	Stomach Contents, etc. ...	...	3	
Waters—Bacteriological				Meat Pie and Ingredients	...	5	
City Supply ...	...	...	13				8
River Waters ...	...	...	4	<b>Education Department.</b>			
			— 17	Food Extract ...	...	1	
Bath Waters ...	...	...	38	Potatoes ...	...	2	
Milks (Breast) ...	...	...	17	Pudding Tin ...	...	1	
Milks (Chemical and Bac-							4
teriological) ...	...	...	3	<b>H.M. Prison.</b>			
Milks (Phosphatase) ...	...	...	1173	Milk (Chemical) ...	...	1	
Black Currant Syrup ...	...	...	1				1
Cheese ...	...	...	1	<b>Ministry of Food—Food Control.</b>			
Chopped Pork Tin ...	...	...	1	Saccharin Tablets ...	...	1	
Cleansing Agent ...	...	...	1	Sausages ...	...	1	
Figs ...	...	...	1				2
Gold Egg Flakes ...	...	...	1	<b>Refuse Disposal Department.</b>			
Grit ...	...	...	1	Ground Mussel Shell ...	...	1	
Margarine ...	...	...	1	Kitchen Waste ...	...	2	
Pork—Tinned Chopped ...	...	...	1				3
Potatoes ...	...	...	1	<b>Sanitary and Baths Committee.</b>			
Soft Soap ...	...	...	2	Lavazone ...	...	3	
Tinned Plums ...	...	...	2	Bath Water ...	...	1	
Tinned Sardines ...	...	...	3				4
			— 1614	<b>Tramways Department</b>			
<b>Public Assistance Committee</b>				General Disinfectant ...	...	1	
Milk (Chemical) ...	...	...	2				1
Waters (Bacteriological) ...	...	...	1	<b>Water Department.</b>			
Waters (Chemical) ...	...	...	1	Bacteriological Waters ...	...	80	
			— 4	Biological Waters ...	...	45	
<b>Civil Defence Authorities</b>				Chemical Waters ...	...	57	
Anti-gas Ointments, No. 3	...	...	1	Aluminium Sulphate ...	...	2	
Bleach Ointment ...	...	...	2	Distilled Water ...	...	1	
Chloride of Lime ...	...	...	1	Indicator ...	...	1	
Condensed Milk ...	...	...	1	Sand ...	...	1	
Flare ...	...	...	1				187
Gas Mask Containers ...	...	...	2	Various other articles ...	...	82	
Incendiary Bomb (contents)	...	...	1				
Sodium Hypochlorite Solu-				<b>Total</b>			
tion ...	...	...	1	...	...	...	1930
Waters (Bacteriological) ...	...	...	6				
			— 16				
			— 1634				

**TABLE J.      Samples Submitted by Members of the Public.**

Article	No.	Article	No.
Bread ... ..	1	Milk ... ..	4
Chocolate ... ..	2	Milk Bottle ... ..	2
Condensed Milk ... ..	1	Rag Flock ... ..	1
Cream Cake ... ..	1	Rum ... ..	1
Muriate of Potash ... ..	1	Saccharin Tablets ... ..	1
Fish Roll ... ..	1	Sweetening Powder ... ..	1
Flour ... ..	1	Tinned Chopped Pork ... ..	1
Layers Mash ... ..	1		
Lemon Substitute ... ..	1	Total ... ..	21

**TABLE K.      ATMOSPHERIC POLLUTION.**

**Volumetric Method of Estimating Sulphur Dioxide Content of Air.**  
**Average daily readings per month at Grey Friars, 1942.**

Month.	Number of deter- minations.	SO <sub>2</sub> in p.p.m. by volume.		
		Average monthly figure.	Maximum.	Minimum.
January ..	27	0.173	0.270	0.080
February ..	24	0.167	0.265	0.109
March .. ..	26	0.136	0.262	0.069
April .. ..	23	0.079	0.123	0.051
May .. ..	24	0.057	0.113	0.032
June .. ..	25	0.053	0.088	0.031
July .. ..	27	0.049	0.065	0.026
August ..	22	0.052	0.080	0.035
September ..	27	0.072	0.168	0.032
October ..	27	0.133	0.311	0.036
November ..	25	0.154	0.275	0.091
December ..	24	0.111	0.253	0.052

**TABLE L.**

**Summary of Samples examined by Bacteriological Methods in 1942**

Milk (Classified in Table E) ... ..	556
Pasteurised Milks as supplied to Schools ... ..	68
Artificial Cream ... ..	26
Reservoir Waters (for Water Committee) ... ..	80
Drinking and Miscellaneous Waters (for Health Committee) ... ..	17
Swimming Bath Waters (see Table G) ... ..	38
Shellfish (for Health Committee) ... ..	11
Total ... ..	796

TABLE M.  
Samples of Milk examined by the Phosphatase Test,

Dairy, etc.	No. Examined.	No. giving less than 2.3 Blue Units. Efficiently pasteurised.	% of Total.	No. giving 2.3—6.0 Blue Units. An Error in Pasteurisa- tion or addition of Raw Milk.	% of Total.	No giving more than 6.0 Blue Units. Serious Error in Pasteurisa- tion or addition of Raw Milk.	% of Total.
1	242	238	98.4	3	1.2	1	0.4
2	61	61	100.0	0	0.0	0	0.0
3	236	232	98.3	2	0.8	2	0.8
4	178	176	98.9	2	1.1	0	0.0
5	166	151	91.0	5	3.0	10	6.0
6	44	42	95.5	1	2.3	1	2.3
7	180	166	92.2	7	3.9	7	3.9
8	66	66	100.0	0	0.0	0	0.0
Misc. (mainly bacteriological)	64	64	100.0	0	0.0	0	0.0
Total	1237	1196	96.8	20	1.6	21	1.7



**TABLE N.**  
**B. Coli Content of Reservoir Water**

Reservoir	No. of Samples	Probable Number of B. Coli per 100 mls.				
		B. Coli Absent	0—2	3—10	11—25	More than 25
<b>Swithland</b>						
Filtered Water	12	5	4	1	2	—
Filtered and Chloraminated Water ..	12	12	—	—	—	—
<b>Cropston</b>						
Filtered Water	12	5	3	3	1	—
Filtered and Chloraminated Water ..	12	12	—	—	—	—
<b>Thornton</b>						
Filtered Water	12	1	2	3	6	—
Filtered and Chloraminated Water ..	12	12	—	—	—	—

# **Report on the Sanitary Inspection Department**

**for the year 1942.**

By

F. G. McHUGH, F.R.San.I., M.S.I.A.,  
Chief Sanitary Inspector.

## **REPORT OF THE CHIEF SANITARY INSPECTOR for the year 1942.**

### **Staff.**

Inspectors A. Smith and A. G. Watkin were called up for military service on the 19th October, 1942.

No other change.

## SYNOPSIS OF SANITARY INSPECTION WORK.

An "inspection" is the first visit paid to premises.

A "re-inspection" is a visit made after notice has been given for the remedying of a defect.

	Inspections.	Re-inspections.	Total.
Re Accumulations ... ..	89	—	89
Air Raid Shelters ... ..	967	—	967
Agricultural Produce (Grading and Marking) Act ... ..	80	—	80
Re Animals, Poultry, Swine, etc	32	—	32
Ashpits and Ashbins ... ..	147	—	147
Bakehouses—Factory ... ..	184	—	184
Non-Factory ... ..	122	—	122
Canal Boats ... ..	24	—	24
Cesspools ... ..	1100	238	1338
Closets—Water ... ..	4	—	4
Privies ... ..	4	—	4
Pails ... ..	45	—	45
Cold Stores ... ..	34	—	34
Common Lodging Houses—Day	—	—	—
Night	2245	1167	3412
Complaints Received ... ..	1817	7477	9294
Complaints Confirmed ... ..	165	—	165
Cowsheds ... ..	470	—	470
Dairies and Milkshops ... ..	85	—	85
Dangerous Structures ... ..	577	—	577
Drains Inspected—Smoke Tests	19	—	19
Chemical Tests	126	—	126
Colour Tests	1257	—	1257
Drains Inspected ... ..	28	—	28
Ditches and Watercourses ...	69	—	69
Entertainment Houses ... ..	200	—	200
Factories ... ..	39	—	39
Fish Frying Premises ... ..	295	—	295
Food Manufacturing Premises ...	587	—	587
Food Warehouses ... ..	1838	—	1838
Houses re Contagious Disease ...	585	—	585
Houses re Contagious Disease Contacts ... ..	199	—	199
Houses re Disinfection ... ..	57	—	57
Houses re Overcrowding ... ..	246	—	246
Houses re Vermin ... ..	146	945	1091
Housing Acts—Houses ... ..	3	—	3
Other Buildings	121	73	194
Housing Acts (Slum Clearance):	4	10	14
Section 25—Houses ... ..	11	—	11
Other Buildings ... ..	20	—	20
Section 11—Houses ... ..	13	—	13
Special Visits ... ..	63	—	63
Houses Let in Lodgings—Day ...	38	—	38
Hotel and Restaurant Kitchens ...	—	—	—
Ice Cream Premises ... ..	446	—	446
Markets—Cattle ... ..	562	—	562
Retail Meat ... ..	514	—	514
Fish and Fruit ... ..	23	—	23
Wholesale Fish and Fruit	20	—	20
Wholesale Meat ... ..			
Wholesale Tripe ... ..			
Carried forward	15720	9910	25630



	Inspections. Re-inspections.		Total.
Brought forward	15720	9910	25630
Meeting with Owner or Tradesman	2726	—	2726
Merchandise Marks Act ... ..	226	—	226
Offensive Trade Premises ... ..	30	—	30
Piggeries ... ..	28	—	28
Shops—Meat ... ..	667	—	667
Fish ... ..	633	—	633
Fruit ... ..	235	—	235
Other Food Shops ... ..	352	—	352
Shops Acts ... ..	600	158	758
Slaughterhouses—Corporation ... ..	19	—	19
Private ... ..	252	—	252
Schools ... ..	20	—	20
Smoke Observations ... ..	7	—	7
Special Visits re Smoke ... ..	49	—	49
Special Visits ... ..	2806	—	2806
Sewers, etc. ... ..	11	—	11
Street Gullies ... ..	15	—	15
Streets or Back Roads ... ..	18	—	18
Stables ... ..	17	—	17
Tips ... ..	14	—	14
Urinal—Public ... ..	67	—	67
Private ... ..	14	—	14
Van Dwellings ... ..	11	—	11
Workshops and Workplaces (ex- cluding Bakehouses) ... ..	42	—	42
Yards and Courts ... ..	568	—	568
Grand Totals ... ..	25147	10068	35215

Notices—Served	—Informal	...	...	...	...	1167
	—Formal	...	...	...	...	74
Complied with	—Informal	...	...	...	...	548
	—Formal	...	...	...	...	22
Samples—Food and Drug Acts ... ..		...	...	...	...	—
Water ... ..		...	...	...	...	20
Bacteriological ... ..		...	...	...	...	621
Shell Fish ... ..		...	...	...	...	4
Milk for T.B. ... ..		...	...	...	...	87
Rag Flock Act ... ..		...	...	...	...	1
Fertiliser and Feeding Stuffs Act ... ..		...	...	...	...	18

### CANAL BOATS.

On register .. ..	40
Inspected .. ..	26

Informal notices served :—

For marking, lettering or numbering .. ..	1
For leaking condition of roofs and counters .. ..	3
For other infringements of regulations .. ..	7

TABLE OF CESSPOOLS, PRIVIES AND PAIL CLOSETS IN CITY.

	Cesspools.	Privies.	Pail Closets.	Chemical Closets.
No. remaining December, 1941 .. .. .	99	—	120	3
No. abolished during year 1942 .. .. .	—	—	1	—
No. remaining December, 1942 .. .. .	97	—	119	3

COWSHEDS.

Number of Dairy Farms in city at end of 1942 ..	20
Number of Cows in city at end of 1942 .. ..	495

DISINFECTION.

No. of articles disinfected .. .. .	3472
Houses or parts of houses disinfected ..	1900

DISINFESTATION.

				<i>Council.</i>	<i>Other.</i>
Houses.	1.	Infested .. .. .		100	326
		Disinfested .. .. .		100	326
	2.	No change.			
	3.	No change.			
	4.	No change.			

Personnel. 5 cases.

Clothing and Bedding. From 25 houses.

DRAINS.

Voluntary Cleansing of Stopped Drains by Health Department.

Thirty-six drains were attended to and of these 28 were unstopped immediately. In the remaining 8 cases the owners' attention had to be called to them.

ADMINISTRATION OF THE FACTORIES ACT, 1937.

1.—Inspection of Factories.

Premises.  (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
Factories .. ..	242	23	—
Total .. ..	242	23	—

2.—Defects found in Factories.

Particulars.  (1)	Number of Defects.		Number of Prosecutions.  (4)
	Found. (2)	Remedied. (3)	
Nuisances under the Public Health Act :—			
Want of Cleanliness ..	7	6	—
Want of Ventilation ..	2	2	—
Overcrowding .. ..	—	—	—
Other Nuisances .. ..	—	—	—
Sanitary Accommodation Insufficient .. ..	15	10	—
Offences under the Factories Act .. ..	—	—	—
Total .. ..	24	18	—

3.—Home Work.

The number of lists received from employers was as follows: —

	Twice in the year		Once in the year	
	Lists.	Outworkers.	Lists.	Outworkers
Wearing Apparel (making)	18	310	10	162



4.—Other Matters. CLASS (1).

Matters notified to H.M. Inspector of Factories :—

Failure to affix Abstract of the Factories Act	..	..	None
Action taken in matters referred by H.M. Inspector as remediable under The Public Health Acts, but not under the Factory Act	{		
	Notified by H.M. Inspector		
			8
	{		
	Reports (of action taken) sent to H.M. Inspector		
			8
Underground Bakehouses in use at the end of the year	..	..	1

MINISTRY OF FOOD—FOOD CONTROL WORK

Certain Inspectors in the department have been engaged in enforcement work for the greater part of the year in connection with Food Rationing and other war-time food laws, and the department has been involved in a number of Police Court proceedings.

The following is a brief summary of the work done in this connection :—

Complaints received, investigated and reports made	...	...	233
Premises visited re complaints	...	...	553
Premises visited re Maximum Prices & Food Control Orders			1,097
Applications for licences to trade	...	...	74
Premises visited re marking of specified foods	...	...	68
Special visits and re-visits	...	...	930
Investigations re improper use of ration books	...	...	73
Interviews with representatives of trade organisations and principals of firms re Food Control Orders	...	...	95
Applications for licences to kill pigs for own consumption			98
Premises visited re disposal of pork after individual permits to slaughter	...	...	70
Investigations into number of meals and facilities for meals at hotels, catering establishments and works canteens			147
Visits paid re alleged illicit trading	...	...	31

Enquiries for Ministry of Food re prevailing prices of fruit and vegetables	...	...	...	...	...	...	156
Premises visited re alleged food hoarding	...	...	...	...	...	...	21
Enquiries and reports made re deferment of calling-up for H.M. Forces of food employees	...	...	...	...	...	...	163
Test purchases	...	...	...	...	...	...	19
Contravention of Food Orders followed by Police Court proceedings	...	...	...	...	...	...	43
Quarter Sessions (Appeal cases)	...	...	...	...	...	...	2

### IMPROVEMENTS TO HOUSES.

No. of  
Houses.

Separate internal water supply in place of taps in common yards	..	..	..	..	..	5
Additional water closets	..	..	..	..	..	96

### SUMMARY OF FOODSTUFFS CONDEMNED.

Table A.

	Tons.	Cwts.	Qrs.	Lbs.		
Meat	...	202	13	—	15	Oatmeal ... 295 lbs.
Fish	...	16	8	—	—	Chocolate ... 83 „
Fruit	...	—	17	2	16	Biscuits ... 30 „
Vegetables	14	3	2	27		Macaroni ... 4 „
Rabbits	...	...	2,870			Sultanas ... 10 „
Preserved Foods						Mustard Powder ... 6 „
(Tinned Goods)		15,860				Pastries ... 194 „
Poultry	...	1,598	head			Beans ... 389 „
Eggs	...	957				Bread ... 30 „
Lobsters	...	11				Tea ... 239 „
Mussels	...	31,962	lbs.			Polony ... 10 „
Cheese	...	165	„			Brawn ... 84 „
Sausage	...	1,472	„			Pressed Pork ... 51 „
Butter	...	46	„			Haslett ... 113 „
Ground Rice	...	102	„			Vanilla Fridge ... 32 „
Jam ...	...	369	„			Shredded Wheat ... 74 „
Bacon	...	2,141	„			Dried Apples ... 50 „
Oranges	...	1,651	„			Flour ... 145 stones
Lard	...	52	„			Pyklets ... 1,355
Rolled Oats	...	7,523	„			Rooks ... 248
Margarine	...	146	„			Pork Pies ... 24
						Fish Cakes ... 96

TABLE A. Totals of meat condemned at Part I. and II.

	British Meat		Imported Meat		British Offal		Imported Offal		Totals	
	T.	C. Qrs. Lbs.	T.	C. Qrs. Lbs.	T.	C. Qrs. Lbs.	T.	C. Qrs. Lbs.	T.	C. Qrs. Lbs.
PrivateSlaughterhouses, Cold Stores, Retail Markets, etc. ...	-	6 2 6	-	- - -	-	3 0 9	-	- - -	-	9 2 15
Ministry of Food's CentralSlaughterhouse	127	1 0 13	4	14 0 13	70	8 1 2	-	- - -	202	3 2 0
Totals ...	127	7 2 19	4	14 0 13	70	11 1 11	-	- - -	202	13 0 15

PART I. Meat condemned at Private Slaughterhouses, Cold Stores, Retail Markets, etc.

TABLE B. Total weights of meat condemned

	Beasts		Calves		Sheep and La m		Pigs		Totals	
	T.	C. Qrs. Lbs.	T.	C. Qrs. Lbs.	T.	C. Qrs. Lbs.	T.	C. Qrs. Lbs.	T.	C. Qrs. Lbs.
Tuberculosis ...	-	1 2 27	-	- - -	-	- - -	-	3 14	-	2 2 13
Other Diseases ...	-	5 3 25	-	- - -	-	- - -	-	1 0 5	-	7 0 2
Totals ...	-	7 2 24	-	- - -	-	- - -	-	1 3 19	-	9 2 15

TABLE C. Number of Animals, Parts and Offals affected with Tuberculosis and other Diseases.

	Beasts			Calves			Sheep and Lambs			Pigs			Totals
	Carcase	Part	Offal	Carcase	Part	Offal	Carcase	Part	Offal	Carcase	Part	Offal	
Tuberculosis ...	-	2	1	-	-	-	-	-	-	-	2	2	7
Other Diseases ...	1	4	1	-	-	-	-	-	-	-	-	1	7
Total ...	1	6	2	-	-	-	-	-	-	-	2	3	14





TABLE D—continued.

IMPORTED MEAT

		Items	Parts			
			Tons	Cwts.	Qrs.	Lbs.
Beef	....	....	—	7	3	21
Tinned Meat	....	....	4	6	0	21
Totals	....	....	4	14	0	13

TABLE E

Total number of Animals slaughtered 111,024, comprising :

		Bulls	Bullocks	Heifers	Cows	Calves	Sheep & Lambs	Pigs	Totals
Casualties	...	195	8598	2986	2791	16556	62711	14850	108687
	...	36	202	216	577	192	660	454	2337
Totals	...	231	8800	3202	3368	16748	63371	15304	111024

TABLE F.  
Number of Whole Carcasses, Parts of Carcasses and Offals rejected for Tuberculosis and Other Diseases.

		TUBERCULOSIS				T.B. Order		Casualties		OTHER DISEASES		Casualties	
		Carcase	Part	Offal		Carcase	Part	Carcase	Part	Carcase	Part	Carcase	Offal
Bulls	...	1	30	19		-	-	1	2	1	1	2	8
Bullocks	...	13	649	422		-	-	8	7	4	102	12	545
Heifers	...	27	224	178		-	-	16	12	2	15	10	129
Cows	...	61	434	513		6	8	74	69	19	48	43	345
Calves	...	13	-	3		-	-	4	1	287	8	22	16
Sheep and Lambs	...	-	-	-		-	-	-	-	60	41	133	1395
Pigs...	...	49	1104	78		-	-	43	173	17	55	13	177
Totals	...	164	2441	1213		6	8	146	264	390	270	235	2615
												83	79

TABLE G.  
Total numbers of Whole Carcasses, Parts of Carcasses and Offals rejected.

	Carcasses		Parts		Offals	Totals
Tuberculosis...	...	316	2713		1301	4360
Other Diseases	...	625	353		2697	3675
Totals...	...	941	3066		3998	8035



TABLE H.  
Percentage of all Animals affected with Disease 7.21 per cent. Percentage of Animals affected with Tuberculosis and other Diseases.

	Bulls	Bullocks	Heifers	Cows	Calves	Sheep & Lambs	Pigs
T.B. Order ...	—	—	—	100.0	—	—	—
Tuberculosis ...	23.3	12.6	14.5	35.5	.14	—	9.5
Other Diseases ...	7.8	7.8	5.5	15.0	2.03	2.6	1.88

TABLE I.  
Percentage of Whole Carcasses rejected.

	Bulls	Bullocks	Heifers	Cows	Calves	Sheep & Lambs	Pigs
T.B. Order ...	—	—	—	35.3	—	—	—
Tuberculosis ...	.86	.23	1.34	4.0	.10	—	.6
Other Diseases ...	1.3	.18	.37	1.8	1.8	.30	.19

TABLE J.  
Tabulated List of other defined Diseases and their incidence in Carcases rejected.

Disease.	Cows.	Bulls.	Heifers.	Bullocks.	Calves.	Sheep.	Lambs.	Pigs.	Total.
Malignant Neoplasm ..	1	-	-	2	1	2	-	-	6
Dropsy ..	7	1	3	4	15	102	7	5	144
Fever—Acute ..	4	1	1	-	8	7	-	8	29
Melanosis ..	-	-	-	-	1	-	-	-	1
Pneumonia ..	2	-	2	1	9	15	1	2	32
Decomposition ..	-	-	-	-	-	2	-	-	2
Dead Animals ..	2	1	-	1	10	38	3	4	59
Immaturity ..	-	-	-	-	238	-	2	-	238
Bruising—Extensive ..	2	-	-	-	1	4	-	-	9
Pyæmia ..	-	-	-	-	-	1	-	-	1
Septic Metritis ..	1	-	-	-	-	1	-	-	2
Septicæmia ..	8	-	1	2	-	4	-	2	18
Gangrene ..	-	-	2	-	1	1	-	-	1
Johnnes' Disease ..	25	-	-	4	2	-	-	-	33
Jaundice ..	-	-	-	-	5	1	-	1	7
Swine Erysipelas ..	-	-	-	-	-	-	-	3	3
Acute Enteritis..	-	-	1	1	13	2	-	5	22
Swine Fever ..	-	-	-	-	-	-	-	-	-
Septic Mastitis..	2	-	-	-	-	-	-	-	2
Uræmia ..	7	-	1	-	-	-	-	-	9
Actinomycosis ..	1	-	1	1	-	-	-	-	2
Joint Ill..	-	-	-	-	5	-	-	-	5
Totals ..	62	3	12	16	309	180	13	30	625

## Inspection of Dairy Cows.

Summary of reports received from local office of Ministry of Agriculture and Fisheries:—

Four reports were received notifying the presence of Tubercle Bacilli in samples of milk supplied to various dairies in the city. Investigations were carried out; in one case there was a history of sale of a beast and in two cases animals sent to the knacker; in one instance a spotted friesland cow was slaughtered under the Tuberculosis Order of 1938.

176 animals in non-designated herds were examined under the Milk and Dairies Order 1926; 9 were found affected with Mastitis. No animals were slaughtered under the Tuberculosis Order of 1938.

In connection with an Undulant Fever case an enquiry was instituted and the milk supply from the dairy which supplied the patient's household milk was examined. A veterinary examination of the cattle of twelve producers of milk was made, and samples of milk were taken from each supplier; the milk of one cow was found to be infected and this was withdrawn from use.

## Tuberculin Tested Herds.

There are no farms in the city holding tuberculin tested licences. Two herds, however, are on the attested register of the Ministry of Agriculture and Fisheries, namely, the Leicester Frith Institution Farm and the Leicester Mental Hospital.

## Accredited Milk.

There are five accredited herds in the city. These herds were examined four times in the year, and 180 animals were examined; 21 were found to be affected with Mastitis. No animals were slaughtered under the Tuberculosis Order of 1938.

## Milk Traders—Licensing and Registration.

		Number	Number	Number
		*	refused	granted
<b>Milk (Special Designations) Order 1936.</b>	Application from cow-keepers to use designation "Accredited"	6	—	6

\* One additional licence was granted towards the end of the year.



**Foods and Drugs (Adulteration) Act.**

**NUMBER OF SAMPLES TAKEN FOR CHEMICAL ANALYSIS.**

1938	1939	1940	1941	1942
1673	1867	1600	1093	783

Number of Samples taken under Fertilisers and Feeding Stuffs  
Act, 1926      ..      ..      ..      ..      ..      ..      ..      13

**Milk (Special Designations) Order, 1936.**

**NUMBER OF SAMPLES TAKEN FOR BACTERIOLOGICAL EXAMINATION.**

1938	1939	1940	1941	1942
634	713	686	574	621

**ADMINISTRATIVE ACTION REGARDING SAMPLES  
NOT REPORTED TO BE ‘GENUINE.’**

(For details of analysis, see Report of the Public Analyst, page 70.)

**MILK SAMPLES REPORTED ‘NOT GENUINE.’**

					Formal	Informal
Milk	...	...	...	...	5	5 (Private)
Pasteurised Milk	...	...	...	...	3	4
Accredited Milk		...	...	...	—	3
T.T. Certified Milk		...	...	...	—	2

# SAMPLES OTHER THAN MILK REPORTED 'NOT GENUINE.'

						Formal	Informal
Bemax	...	...	...	...	...	—	1
Brandy mint		...	...	...	...	—	1
Bread	...	...	...	...	...	—	1 (Private)
Coffee	...	...	...	...	...	—	1
Coffee Extract	...	...	...	...	...	1	—
Cheese Powder	...	...	...	...	...	—	1
Fish Roll (tinned)		...	...	...	...	1	1 (Private)
Flour	...	...	...	...	...	—	3
Jam	...	...	...	...	...	—	1
Lemon Substitute		...	...	...	...	1	3
Lemon Substitute		...	...	...	...	—	1 (Private)
Lem-Lem	...	...	...	...	...	—	2
Lemexa	...	...	...	...	...	1	2
Marg ine	...	...	...	...	...	—	1
Meat Roll	...	...	...	...	...	—	1
Meat Spread	...	...	...	...	...	—	1
Milkstead	...	...	...	...	...	—	1
Onion-ex	...	...	...	...	...	—	1
Onion Substitute	...	...	...	...	...	—	1
Pork Luncheon Meat	...	...	...	...	...	—	1 (Private)
Rose Hip Syrup	...	...	...	...	...	1	1
Sugar	...	...	...	...	...	—	1
Sweetening Powder	...	...	...	...	...	—	1 (Private)
Sausage	...	...	..	...	...	1	1
Vinegar	...	...	...	...	...	—	1
Ammon. Tincture of Quinine				...	...	—	1
Aspirin Tablets			...	...	...	—	1
Camphorated Oil		...	...	...	...	—	1
Fruit Preserving Tablets			...	...	...	1	—
Glycerin Substitute	..	..	...	...	...	—	7
Glauber's Salts	..	..	..	..	..	—	1
Magnesia	..	..	..	..	..	—	1
Tincture of Iodine	...	...	...	...	...	—	1
Balancer Meal		...	...	...	...	—	1
Steamed Bone Meal	...	...	...	...	...	—	1

In all cases where proceedings were not taken, written cautions were sent or "follow-up" samples were immediately obtained.

## EXAMINATION OF MILK FOR PRESENCE OF TUBERCLE BACILLI.

### Milk and Dairies (Consolidation) Act, 1915.

Number of Samples of Milk taken for microscopical and biological  
examination for Tubercle Bacilli—

Year.	1938	1939	1940	1941	1942
Number taken ..	193	177	44	54	87
Percentage containing Tubercle Bacilli	6.22	9.04	—	5.55	5.75

### Details respecting samples taken, 1942.

	Number of Samples taken.	Number reported containing Tubercle Bacilli.	Number reported negative.	Number unsatis- factory although negative as regards Tubercle Bacilli.
Cowkeepers with registered prem- ises within City boundaries ..	19	—	18	1
Cowkeepers with premises out- side City boundaries ..	68	5	58	5
Totals ..	87	5	76	6

## OFFENSIVE TRADES.

Particulars of all offensive Trades in the City.

Number of Tripe Dressers .. .. .	12
„ Marine Store Dealers .. .. .	14

## RENT RESTRICTIONS ACTS, &c.

Two certificates were issued under the above Acts.



## SHOPS ACT, 1912—1934.

The usual inspections have been carried out.

A survey has been made of licensed premises, hotels and public houses, special attention being paid to the facilities for washing glasses, the beer-raising plant and the disposal of waste beer. Many notices for improvements have been served.

## SLAUGHTERHOUSES.

### Particulars of all Slaughterhouses in the City.

Private Slaughterhouses .. .. .	34
Licensed Private Slaughterhouses (includes two Knackers' Yards) .. .. .	3
Corporation Slaughterhouses situated at Cattle Market and let off as Private Slaughterhouses .. .. .	19
Corporation Slaughterhouses situated at City Hospitals :	
City Mental Hospital .. .. .	1
City General Hospital .. .. .	1
	—
Total Slaughterhouses .. .. .	58
	—

## LEGAL PROCEEDINGS.

Public Health Acts .. .. .	3
Food and Drugs Act .. .. .	3

# LEGAL PROCEEDINGS.

Acts, Bye-laws or Regulations under which proceedings were instituted.	Default or Offence.	Result.	Fines. £ s. d.	Costs. £ s. d.
Public Health Act	Failure to comply with Sanitary notice	Order of Court to comply with the notice within thirty-one days.	2 0 0	—
Ditto	Ditto	Order of Court to comply with the notice within twenty-eight days.	—	—
Ditto	Ditto	Order of Court to comply with the notice within twenty-one days.	—	—
Food and Drugs Act	Selling tinned food Label misleading	Conviction	10 0 0	—
Ditto	Selling coffee extract not of nature, substance and quality demanded.	Ditto	1 0 0	—
Ditto	Selling adulterated milk	Ditto	1 0 0	—

F. G. McHUGH, F.R.San.I., M.S.I.A., *Chief Sanitary Inspector.*

## APPENDIX VII.

# Report on the Venereal Diseases Scheme for the Year 1942.

By

C. HAMILTON WILKIE, Ch.B., B.Sc., M.D.,  
Director of Venereal Diseases Services.

I herewith submit a brief report on the venereal disease scheme for Leicester and Leicestershire for the year 1942.

Our chief V.D. Department is at the Royal Infirmary, Leicester. During the year we had a total of 1,247 new cases (1941—1,091). We had thus an increase of 156 new cases over the previous year.

Detailed analysis of these cases may be obtained from the official Ministry of Health Report (Form V.D.R. Revised—1941).

It is sufficient here to say that of the 1,247 new cases we had:—

(1) Return cases with same infection	10
(2) New syphilitic cases	... 144
(3) Soft chancre	... 1
(4) Gonorrhoea	... 369
(5) Non-venereal cases	... 532 (1941—445)
(6) Undiagnosed on 31/12/42	... 8
(7) Transfers from other centres	... 183
Total	... 1,247

An analysis of the new syphilitic cases (2) and of the new gonorrhoeal cases (4) shows that we had:—

(a) Acute early syphilitic cases	... 51 (1941— 37)
(b) Late syphilitic and congenital	... 93 (1941— 86)
(c) Gonorrhoea	... 369 (1941—326)



I believe that we in Leicester can be satisfied that our increase, as shown in items (a) and (c), is relatively small when compared with some areas in the country. It is well known that there has been a considerable increase of acute venereal disease in the country for the year. We show an increase of 14 acute early syphilitics and an increase of 43 gonorrhoeal cases over the previous year. These cases include service cases as well as civilian cases.

Our non-venereal cases have risen considerably. This type of case will increase even more in the future, as a result of the nationwide campaign against venereal disease.

Out-patients at the Royal Infirmary centre totalled 17,281 for the year and in-patients totalled 144.

Pathological work done within the department was considerable, despite the fact that most of the pathology of the department is conducted by the Pathologist (Dr. W. W. Mackarell) at the Royal Infirmary Laboratory.

The amount of work done in the Male and Female V.D. Departments during the year has been considerably more than in previous years. At times it has been a strain on the nursing and medical staff to cope successfully with the extra work and at the same time to keep up the standard of efficiency. I owe a lot to the staff of the male and female departments for their co-operation throughout the year.

### **Loughborough General Hospital V.D. Clinic.**

The new cases here totalled 122 (1941—54). The "transfers from other centres" totalled 49, syphilitics 4, gonorrhoeal cases 14, and non-venereal cases 55.

The total attendances were 818.

This newer centre, which is open every Monday evening, is functioning well, and I consider it a valuable addition to our V.D. scheme.

The work at this clinic shows every sign of increasing and already puts considerable strain on a staff consisting only of an out-patient sister, a senior male nurse, and myself.

### **St. Mary's Home Centre.**

Valuable work continues to be done at St. Mary's Home, Ashleigh Road, Leicester. New cases (chiefly transfers from

centres) totalled 45, and the total attendances 97. This centre is primarily for unmarried destitute girls who may require examination or treatment for venereal disease. We owe much to the staff of St. Mary's Home for the valuable welfare work done throughout the year.

### **Diagnosis and Treatment.**

No great change has taken place in the treatment of syphilis. Early diagnosis, followed by regular treatment, is essential. I believe that all cases of syphilis should be treated by the venereologist. Late cases may require highly specialised and individualised treatment.

The treatment of gonorrhoea has greatly advanced in recent years. With the newer methods of treatment, however, new problems arise. Three rules must be recognised:—

- (1) The infection must always be diagnosed by tests prior to the commencement of modern treatment. It is wrong practice to give chemotherapy and then send the patient to the V.D. centre for diagnosis. Unfortunately, this is sometimes done.
- (2) The necessity of thorough tests of cure still remains.
- (3) Careful enquiry into all possible contacts must be made. The marital partner should be specially considered. Several tests may be necessary.

The non-venereal infection is apparently becoming more common. I would here mention two non-venereal conditions which are worthy of note:—

- (a) The non-venereal urethritis in males (organismal or chemical).
- (b) The trichomonas vaginalis infestation in females. This condition often occurs in conjunction with a gonococcal infection.

### **Propaganda.**

Education of the public on the dangers which may result from venereal disease has received more prominence this year. We in Leicester began our education campaign as far back as 1932. Thirty-six lectures were given during the year (1942). The total lectures given now come to over 200. I have always held the strong belief that public education on sex problems and on the dangers of venereal disease is a very necessary part of a V.D. scheme. I prefer my own set of lantern slides, which may be varied to suit



the particular audience. These lectures, accompanied by lantern demonstration, are in great demand.

We must not relax our efforts in education. Much remains to be done to reduce the incidence of venereal disease in this country.

I here acknowledge the help and encouragement given to me by the Medical Officers of Health for Leicester and Leicestershire and their respective Health Committees.

At the time of this report being submitted to the Health Departments our education scheme has been generally acknowledged in the fact that I received the honour of being asked to give a paper on this subject at the Conference held by the Central Council for Health Education in February (26/2/43).

The programme of this Conference and a copy of my paper is hereby given as an appendix to this report.

C. HAMILTON WILKIE.

**Programme of Conference on "HEALTH EDUCATION and the VENEREAL DISEASES" held on 26th February, 1943.**

*Morning Session*

Minister of Health (Rt. Hon. Ernest Brown, M.P.): Opening remarks.

The Archbishop of Canterbury: "The Church's Approach."

Bailie Violet Robertson (Ex-Convener of Public Health, Glasgow Corporation): "Problems of a Large Port."

Miss Manchee (Chief Almoner, St. Mary's Hospital, Paddington): "Problems of Youth."

Dr. W. Allen Daley (Medical Officer of Health, County of London): Vote of thanks to the speakers.

*Afternoon Session*

Dr. C. Hamilton Wilkie (Director of V.D. Services, Leicester): "A V.D. Scheme in Operation."

Lord Winster: "Work among Seamen."

Dr. T. O. Garland (Member of the B.M.A. Committee on Industrial Health): "The Industrial Angle."

Major Paul Padget (U.S.A. Army).



## **“A VENEREAL DISEASE SCHEME IN OPERATION”**

By Dr. HAMILTON WILKIE,  
Director of Venereal Disease Services, Leicester.

I have been asked to give a review on the various methods used in Leicester and Leicestershire to improve our attack against venereal diseases. I must be brief, as the time at my disposal is short. I shall first consider our efforts in education of the public and some of the lessons gained, flaws as well as achievements.

When I was appointed to Leicester in 1931 little had been done to enlighten the public on the dangers of venereal diseases. The Medical Officers of Health and their Committees gave me a free hand to go ahead with public lectures. At first, in 1932, the term “venereal disease” was avoided in notices advertising lectures. The bills were headed “Lectures on Social Hygiene.” We had then quite a number of people who were more concerned that venereal disease should not be mentioned than that it should be stamped out. In 1933, however, it was considered that the term “venereal disease” could appear on public notices, and it did. Things were changing for the better.

The public interest in properly advertised lectures on venereal diseases was apparent from the beginning, and the lecture halls were always crowded. Each lecture was accompanied by a lantern-slide demonstration showing charts and actual cases. A free discussion always followed. I preferred my own set of slides to an obviously acted film with perhaps a title quite unsuited. They had at least the value of realism. Moreover, the slides could be varied to suit the particular audience, whether male, female, or, as on one occasion, mixed. The discussion which followed always proved valuable and demonstrated the desire for education on sex problems.

Up to date I have given 180 lectures in my area (76 to civilians and 104 to the Services). The civilian lectures included lectures to factory workers and to various organisations such as the Police Force and St. John Ambulance. They also included two to the General Practitioners in the area, given with a view to promoting better understanding and co-operation between them and the Venereal Disease Department.

The cost of this extensive education scheme has been small, being confined mainly to advertisements and the hire of a hall on a few occasions.

Now for the lessons gained from lectures given to a civilian audience.

To analyse the results more clearly I shall divide civilian lectures into two groups: (a) the freely advertised public lectures, and (b) the lectures to factory workers and various organisations.

As far as the freely advertised public lectures are concerned, I believe they did not achieve their real object. Although the halls were well filled, the majority of the audience were made up of middle-aged people, a few past and present patients, a few neurasthenics, some who were morbidly curious, and the people who usually attend public lectures. The *young people* from all stations of life were not sufficiently represented.

On the other hand, the lectures given to factory workers and various organisations were different. Here we had an audience often young and keen for medical knowledge and guidance, and this was encouraging because we know that the ignorance of the eighteens to twenty-fives can be disastrous.

The atmosphere was different. They were not slipping into a hall specially chosen for its seclusion. Often the lecture was more or less compulsory. The discussion which followed was intelligent and of great value.

War conditions have given me a new outlook on public health education. Now we can assess more accurately the value of compulsory lectures to young and middle-aged men and women. I have no doubt whatever of their value. I only wish that some of you here to-day could have been present at some of the lectures I have given to soldiers, members of the A.T.S., men and women of the N.F.S., girls of the Land Army, and men and women of First Aid Posts (totalling approximately 20,000 people). The discussion which followed would have convinced you of their value.

It is argued by a few that lectures on sex and on venereal diseases do not result in more cases of venereal disease coming to the clinics, but only result in the attendance of a few neurasthenics and non-venereal. It is true that we do have some neurasthenics and non-venereals coming as a direct result of lectures.

I believe, however, that education has prevented a considerable number of venereal disease cases in our area.

My defaulter rate has fallen and propaganda, among other things, has played its part. By defaulter I mean the case who



ceases to attend before the doctor has completed the treatment and tests of cure have been carried out. The ultimate criterion of success of the public lectures should be a drop in the new cases.

If we launched an extensive campaign of venereal disease education for the young adults of this country, the ultimate criterion of success would be a fall in new cases of venereal disease. Now a few points on the lecture itself and on the qualifications desirable in the lecturer. Every lecture on venereal disease should include the true statement that the ideal preventative against venereal disease is complete loyalty between husband and wife. It should also include, I believe, a description of some of the commoner non-venereal conditions. The public must be made to realise that all who attend a venereal disease department have not necessarily venereal disease, nor are they necessarily guilty of having broken our moral code. Emphasis should always be placed on the fact that cases who report at the earliest possible moment can entertain the highest hopes of quick and complete cure.

As regards the lecturer, he (or she) should be a specialist on venereal diseases. He should be keen on lecturing and should have some aptitude for the job. Not every venereologist likes lecturing or will lecture. I would never advise a lecturer on venereal disease to enter into a free discussion after his lecture unless he felt capable of answering what may be at times very tricky questions. Otherwise omit the discussion. He must have a very broad understanding of human nature.

Now let me leave the subject of lectures and turn to other methods of venereal disease education.

What about the wireless? The recent broadcast by Sir Wilson Jameson was one of the finest things that has happened in the field of public health propaganda. It did much to strengthen my campaign in Leicester.

Broadcasting is an excellent medium for venereal disease education. It speaks to the home circle and therefore to a good many people who would not readily attend a public meeting. It does not, of course, *replace* the personal lecture followed by free question and answer.

Then we have the Press. The Press has helped and is now helping more than ever. A number of people have expressed to me their interest in recent articles. We must take care, however,



that all Press articles on this subject have the approval of some authority.

Now we have a very important advertisement appearing in daily and weekly newspapers. This excellent and clearly-understood advertisement is issued by the Ministry of Health and the Central Council for Health Education. It will be read and appreciated by many thousands of people. I believe it will achieve much.

I shall not mention to-day the effects of films and pamphlets, nor the question of venereal disease almoners, nor contact training. These can be discussed later if desired.

Any scheme of venereal disease education must depend for its success upon the guarantee of efficient and convenient treatment.

Newer methods of treatment and an increase in the number of free treatment centres make this possible.

A venereal disease clinic should be organised so that we have a minimum of delay combined with secret and highly specialised treatment. We must avoid the necessity of a patient having to make unnecessary explanations for undue absence from home. By doing so we can help to reduce our defaulters.

So much at present for venereal disease education and for the necessary guarantee of efficient and convenient speedy treatment, but that is not all.

It is as well for us to remember that the whole problem of the spread of venereal disease falls into a very special category. Infection is spread, more or less directly, by the agency of a powerful primary instinct. The conditions of modern civilisation tend to over-stimulate that instinct.

If we had a diminution in the unwise use of alcohol, economic conditions permitting of reasonably early marriage, and a greater spread of cultural interests, I believe things would be improved.

Reforms of this nature, and there are many to be made, would narrow down our field of endeavour. They would enable us to concentrate upon the purely medical problem with every hope of success.

Venereal disease education of the young adults of this country must contribute towards that success.

C. HAMILTON WILKIE.

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